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KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 11/15/2023 12:57 PM PG: 1 OF 4

DOCUMENT PREPARED BY:

Shanna Lake
11302 S. LaFlin St
Chicago IL 60643

MAIL SUBSEQUENT TAX BILLS TO:

Shanna Lake
11302 S. LaFlin St
Chicago IL 60643

SPECIAL NOTICE: THIS IS A NON-MANDATORY COURTESY FORM, AND IS NOT LEGAL ADVICE IN ANYWAY!

NOTICE OF DEATH AFFIDAVIT & ACCEPTANCE OF TRANSFER ON DEATH INSTRUMENT (TODI) DEED

Pursuant to §755 ILCS 27/75, Sec. 75. Notice of death affidavit, the undersigned beneficiary/beneficiaries, having been duly sworn and under oath, do state the following: That, Inez Lake died on July 6, 2020

as a resident of Cook County, Illinois, as owner of the Property Identification Number:

25 - 20 - 912 - 024 - 0000

With the Legal Description of (attach exhibit if more room is needed):

Lot Twenty (20) AND THE NORTH HALF (1/2) OF LOT Twenty-one (21) in Roger's Resubdivision of block sixty-three (Except Lots one(1) to fourteen(14) inclusive in said Block) in Washington Heights in section seven (7), Township Thirty-seven (37) North Range

And Common Address Of:

(see attached) (See attached) →

And Furthermore, the aforementioned owner (who is now deceased) recorded a Transfer on Death Instrument (TODI) on

11/29/2018 as Document Number, 1833308079 naming the following beneficiary/beneficiaries

as the successive owner(s) of the property referenced above with the stated percentage/share of said property:

NAME:	ADDRESS:	SHARE:
Shanna Lake	11302 S. LaFlin Chicago Ill. 60643	33%
Kenneth Lake	6791 Wytham Dr. Memphis TN 38119-8422	33%
Alan Lake	11205 S. Longwood Dr. Chicago Ill. 60643	33%

This form is compliments of:

KAREN A. YARBROUGH

COOK COUNTY CLERK

Page 1 of 2

Shanna Lake
11302 S. Laflin

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Exhibit "A"

Fourteen (14) East of the third Principal Meridian, in Cook County, Illinois.

COOK COUNTY CLERK OFFICE
RECORDING DIVISION
118 N. CLARK ST. ROOM 120
CHICAGO, IL 60602-1387

Property of Cook County Clerk's Office

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COOK COUNTY CLERK NOTICE OF DEATH AFFIDAVIT & TRANSFER ON DEATH INSTRUMENT (TODI) DEED PAGE 2 OF 2 (COURTESY FORM)

In witness whereof, the undersigned beneficiaries hereby accept the transfer of residential real estate under the Transfer on Death Instrument, this _____ (day) of _____ (month), _____ (year).

Beneficiary Name & Signature Section:

Shanna Lake
Print Beneficiary Name Above

Print Beneficiary Name Above

Shanna Lake
Beneficiary Signature Above

Beneficiary Signature Above

Print Beneficiary Name Above

Print Beneficiary Name Above

Beneficiary Signature Above

Beneficiary Signature Above

Print Beneficiary Name Above

Print Beneficiary Name Above

Beneficiary Signature Above

Beneficiary Signature Above

Notary Public Section:

STATE OF ILLINOIS }
COUNTY OF COOK } SS

I, the undersigned, a Notary Public in and for the State aforesaid, DO HEREBY CERTIFY THAT

Shanna Lake

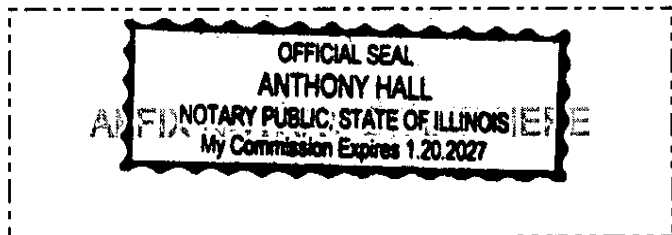
List the Name(s) of ALL Beneficiary(ies) who appeared personally before you ABOVE

personally known to me to be the same person or persons whose name or names are subscribed to the foregoing instrument, appeared before me this day in person and swore on oath to the above foregoing affidavit.

Signed and sworn to before me this 7 (day) of November (month), 2023 (year).

Anthony Hall
Signature of Notary Above

Anthony Hall
Print Name of Notary Above



This form is
compliments of:

KAREN A. YARBROUGH
COOK COUNTY RECORDER OF DEEDS

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**COOK COUNTY CLERK VITAL RECORDS
CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2020 0064348

DATE ISSUED 8/17/2020

DECEDENT'S LEGAL NAME INEZ BOWMAN LAKE		SEX FEMALE	DATE OF DEATH JULY 06, 2020	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 90 YEARS	DATE OF BIRTH JULY 10, 1929		
CITY OR TOWN CHICAGO	HOSPITAL OR OTHER INSTITUTION NAME 11302 S LAFLIN			
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH DIVORCED FROM MARRIAGE	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 11302 S LAFLIN	APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60643	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOHN BOWMAN	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION PRISCILLA BLACKWELL
INFORMANT'S NAME SHANNA LAKE	RELATIONSHIP DAUGHTER	MAILING ADDRESS 11302 S LAFLIN, CHICAGO, IL, 60643		
METHOD OF DISPOSITION DONATION	PLACE OF DISPOSITION ANATOMICAL GIFT ASSOCIATION OF ILLINOIS	LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION JULY 06, 2020	
FUNERAL HOME NOBLE FUNERAL HOME, INC. 8158 SO. EXCHANGE AVE, CHICAGO, IL, 60617				
FUNERAL DIRECTOR'S NAME NICOLE NOBLE		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016066		
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH		DATE FILED WITH LOCAL REGISTRAR JULY 10, 2020		
CAUSE OF DEATH	PART I	CEREBRAL VASCULAR ACCIDENT		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 1 HOURS
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a.			
	b.	Due to (or as a consequence of)		
	c.	Due to (or as a consequence of)		
PART II: Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I			WAS AN AUTOPSY PERFORMED? NO	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
FEMALE PREGNANCY STATUS NOT APPLICABLE		MANNER OF DEATH NATURAL		
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?	
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRED			IF TRANSPORTATION INJURY, SPECIFY	
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE JULY 02, 2020	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 11:30 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED JULY 06, 2020	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR JULIE VANDERBILT, 2320 W HIGH ST, BLUE ISLAND, ILLINOIS, 60406			PHYSICIAN'S LICENSE NUMBER 036-090162	

1437581



This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health.

Karen A. Yarbrough
Karen A. Yarbrough
Cook County Clerk

