



Doc# 2403857022 Fee \$88.00

RHSP FEE:\$18.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 02/07/2024 12:41 PM PG: 1 OF 2

DECEASED JOINT TENANCY AFFIDAVIT

State of Illinois)
County of Cook) SS.

GARY R. FERGUSON, hereinafter called Affiant(s) being duly sworn states that she resides at: 16762 STEEPLECHASE PKWY, ORLAND PARK, IL 60467. That Affiant was acquainted with FREDRICIA FERGUSON, hereinafter referred to as Deceased, and at the time of Decedent's death, was one of the owners of the land in Cook County, Illinois, described as:

Lot 26 in State Road Subdivision Number 1, being a subdivision of the North 35 feet of Lot 55 and all of Lots 51, 52, 53, 54, 60, 61, 62, 68, 69 and 70, all in Meyer River Highlands Subdivision of the North 1/2 of the North 1/2 of the Southwest 1/4 of Section 1, 38 North, Range 12, East of the Third Principal Meridian; also all of Lots 95, 101, 102, 104, and 105, all in Meyer's Second Addition to River Highlands, being a subdivision of the South 1/2 of the North 1/2 of the Southwest 1/4 of Section 1, Township 38 North, Range 12 East of the Third Principal Meridian, in Cook County, Illinois.

CKA: 4318 Amelia, Lyons, IL 60534
Permanent Index Number: 18-01-302-012-0000

That the Deceased died on 11-23-2013 as evidenced by the Deceased's death certificate attached hereto. That the Deceased, at the time of her death, held her share of the above-mentioned property as a joint tenant.

Subscribed and sworn before me
this July 20th, 2023.



GARY R. FERGUSON, Affiant

This instrument prepared by and Mail To:
Robert J. Zapolis, Zapolis & Associates, 9991 191st Street, Mokena, IL 60448

UNOFFICIAL COPY

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH


STATE FILE NUMBER 2013 0091937

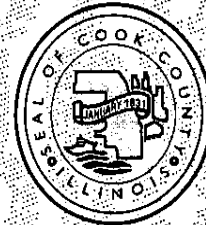
DATE ISSUED 12/6/2013

DECEDENT'S LEGAL NAME FREDERICA DELORES ADAMS-FERGUSON		SEX FEMALE	DATE OF DEATH NOVEMBER 23, 2013		
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 81 YEARS	DATE OF BIRTH AUGUST 25, 1932			
CITY OR TOWN ORLAND PARK		HOSPITAL OR OTHER INSTITUTION NAME 16762 STEEPLECHASE PARKWAY			
PLACE OF DEATH DECEDENT'S HOME					
BIRTHPLACE DETROIT, MI	SOCIAL SECURITY NUMBER	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME GARY FERGUSON	EVER IN U.S. ARMED FORCES? NO	
RESIDENCE 16762 STEEPLECHASE PARKWAY	APT. NO.	CITY OR TOWN ORLAND PARK	INSIDE CITY LIMITS? YES		
COUNTY COOK	STATE IL	ZIP CODE 60467	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION FREDRICK MORRIS	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION BEATRICE GREEN	
INFORMANT'S NAME GARY FERGUSON		RELATIONSHIP HUSBAND	MAILING ADDRESS 16762 STEEPLECHASE PARKWAY, ORLAND PARK, IL, 60467		
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION THE LAKES CREMATORY	LOCATION - CITY OR TOWN AND STATE LAKE VILLA, IL	DATE OF DISPOSITION NOVEMBER 27, 2013	
FUNERAL HOME UNITY FUNERAL PARLORS INC, 4114 S. MICHIGAN AVENUE, CHICAGO, IL, 60653					
FUNERAL DIRECTOR'S NAME BRENDA L. THACKER			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014694		
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR DECEMBER 6, 2013		
CAUSE OF DEATH PART I	END STAGE GASTRIC CANCER			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
IMMEDIATE CAUSE (Final disease or condition resulting in death)	Due to (or as a consequence of)				6 MONTHS
	Due to (or as a consequence of)				
	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 NOVEMBER 05, 2013	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 03:01 AM	
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 25, 2013		
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH ZAFER JAWICH, MD, 1890 SILVER CROSS BLVD, SUITE 350, NEW LENOX, ILLINOIS, 60451			PHYSICIAN'S LICENSE NUMBER 036092398		



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.


 David Orr
 Cook County Clerk



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Property of Cook County Clerk's Office

TO TEST FOR AUTHENTICITY: The face of this document has a green background. Verification of some of the security features can be accomplished by:

- Identifying invisible UV fibers embedded in the paper.
- Applying fresh liquid bleach to activate color stain chemical protection reaction.
- Face of document has a green border with ornate lines including reverse microtext.
- This backer copy is constructed with a microtext border. Inspection under magnifier shows "ILLINOISDEATHCERTIFICATE" in microtext.
- Document is protected with embossed Cook County seals.
- Inspect background with a magnifier to verify the encrypted NaNQcopy™ algorithm in body of document.
- Photocopying this document produces the word "VOID" across the face.

U.S. Security Patents: 6,692,030, 7,196,822

www.isp-vft.com Ref: 112901