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1999-04-08 13:53:54

Cook County Recorder 23.50

ABOVE SPACE FOR RECORDER'S USE ONLY

DECEASED JOINT TENANCY AFFIDAVIT

The undersigned, Laura I. Minster, being duly sworn states that she resides at 123 Sturtz, in the Village of Barrington, Illinois.

That Decedent, David V. Minster, died on December 16, 1996 owning real estate in joint tenancy with Laura I. Minster, and legally described as follows:

LOT FOURTEEN (14) IN BARRINGTON'S TERRACE, BEING A SUBDIVISION OF PART OF LOT 30 IN ASSESSOR'S DIVISION OF THE WEST HALF (1/2) OF THE NORTHWEST QUARTER (1/4) AND THE SOUTHEAST QUARTER (1/4) OF THE NORTHWEST QUARTER (1/4) OF SECTION 1, TOWNSHIP 42 NORTH, RANGE 9, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF REGISTERED IN THE OFFICE OF THE REGISTRAR OF TITLES OF COOK COUNTY, ILLINOIS, ON OCTOBER 25, 1955, AS DOCUMENT NUMBER 1629937.

The street address of the real estate is 123 Sturtz, Barrington, Illinois 60010. The Permanent Real Estate Index No. is 01-01-123-069.

A certified copy of the Death Certificate is attached as evidence hereof.

Acknowledged before me this 24th day of February, 1999.

Tina L. McMahon
(Notary Public)

Laura I. Minster (SEAL)
Laura I. Minster



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BHC
\$23.50

UNOFFICIAL COPY

Property of Cook County Clerk's Office

"JANE JACOBI"
MORNING JOURNAL
PUBLISHED BY THE
12850 GRAND ST. CHICAGO, ILL.

DECEDENT'S BIRTH NO.

REGISTRATION DISTRICT NO. 4955
REGISTERED NUMBER

STATE OF ILLINOIS

STATE FILE NUMBER

UNOFFICIAL COPY

MEDICAL CERTIFICATE OF DEATH

Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS

DECEASED-NAME FIRST MIDDLE LAST SEX DATE OF DEATH (MONTH, DAY, YEAR)

1. DAVID W. MINSTER 2. MALE 3. DECEMBER 16, 1996

COUNTY OF DEATH AGE-LAST BIRTHDAY (YRS) UNDER 1 YEAR UNDER 1 DAY DATE OF BIRTH (MONTH, DAY, YEAR)

4. LAKE 5a. 65 5b. MOS 5c. HOURS MIN 5d. JUNE 4, 1931

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) IF HOSP. OR INST. INDICATE D O A OP/EMER/INPATIENT (SPECIFY)

6a. CUBA 6b. GOOD SHEPHERD HOSPITAL 6c. INPATIENT

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)

7. CHICAGO, IL 8a. MARRIED 8b. LAURA IRELAND 9. YES

SOCIAL SECURITY NUMBER USUAL OCCUPATION KIND OF BUSINESS OR INDUSTRY EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)

10. 360-24-0767 11a. EXAMINER 11b. BANKING 12. 12 13. 4

RESIDENCE (STREET AND NUMBER) CITY, TOWN, TWP. OR ROAD DISTRICT NO. INSIDE CITY COUNTY

13a. 123 STURTZ STREET 13b. BARRINGTON 13c. YES 13d. COOK

STATE ZIP CODE RACE (WHITE, BLACK, AMERICAN INDIAN, ETC.) (SPECIFY) OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, ETC.)

13e. ILLINOIS 13f. 60010 14a. WHITE 14b. YES NO YES SPECIFY:

PARENTS

FATHER-NAME FIRST MIDDLE LAST MOTHER-NAME FIRST MIDDLE (MAIDEN) LAST

15. WALTER MINSTER 16. MAUREEN BROWN

INFORMANT

INFORMANT NAME (TYPE OR PRINT) RELATIONSHIP MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)

17a. LAURA MINSTER 17b. SPOUSE 17c. 123 STURTZ ST. BARRINGTON, IL 60010

CAUSE

18. PART I. Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

Immediate Cause (Final disease or condition resulting in death) (a) CARDIORESPIRATORY INSUFFICIENCY MINUTES

CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. (b) HYPOTENSION HOURS

(c) PROLONGED FRIER DAYS

PART II. Other significant conditions contributing to death but not constituting the underlying cause given in PART I.

RECENT MYOCARDIAL INFARCTION, CEREBROVASCULAR ACCIDENT, DEHYDRATION

AUTOPSY (YES/NO) WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO)

19a. YES 19b. YES

OPERATION

DATE OF OPERATION, IF ANY MAJOR FINDINGS OF OPERATION IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?

20a. NA 20b. NA 20c. YES NO

CERTIFIER

I (DID/DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON (MONTH, DAY, YEAR) WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) HOUR OF DEATH

21a. 12/16/96 21b. YES 21c. 2:14 pm M.

TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE INDICATED DUE TO THE CAUSE(S) STATED.

22a. SIGNATURE NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) DATE SIGNED (MONTH, DAY, YEAR)

22c. 500 W. HWY 22 BARRINGTON 22b. DEC. 17, 1996

22c. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) ILLINOIS LICENSE NUMBER

22d. 36-56645

NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.

DISPOSITION

BURIAL, CREMATION, REMOVAL (SPECIFY) CEMETERY OR CREMATORY-NAME LOCATION CITY (OR TOWN) STATE DATE (MONTH, DAY, YEAR)

24a. BURIAL 24b. EVERGREEN 24c. BARRINGTON, IL 24d. DEC. 19, 1996

FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP

25a. STIRLEN-PIEPER FUNERAL HOME 149 W. MAIN ST. BARRINGTON, IL 60010

FUNERAL DIRECTOR'S SIGNATURE FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER

25b. [Signature] 25c. 034-014872

LOCAL REGISTRAR'S SIGNATURE DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)

26a. [Signature] 26b. December 18, 1996

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named at Item 1, and that this record was established and filed in my office in accordance with the provisions of the Illinois Vital Records Act.

DATE December 18, 1996 SIGNED Donna Epstein

AT VILLAGE OF LAKE ZURICH OFFICIAL TITLE DEPUTY REGISTRAR

The original record of this death is permanently filed with the ILLINOIS DEPARTMENT OF PUBLIC HEALTH at Springfield. County clerks and local registrars are authorized to make certifications from copies of the original record. The Illinois statutes provide that the certification of a death record by the Department of Public Health, local registrar or county clerk shall be prime fact evidence in all courts and places of the facts therein stated.