LEGAL DESCRIPTION:

LAKE COUNTY
LAKE COUNTY
LAKE COUNTY
LAKE COUNTY
thereof, recorded in Plat Book 5, page 9, in the Office of the Recorder of Lake
County, Indiana.

9908 | 372

990CT - In AM 100

MORPIS W. CARTER
RECORDER First American Title Insurance Company

PROPERTY ADDRESS:

3528 Hemlock Street, East Chicago, IN 46312

	<u> FATE AFFIDAVIT</u>
William Pabey	, Affiant, states that:
1. Luis C. Pabey of July 1999,	, deceased, died on the 14^{\prime} day
2. Affiant is: the surviving spouse of the	decensed,
the Personal Representative estate of the deceased;	c/Executor-trix of the nent is
	will which has been probated; IAL E D
	will which has not been probated; operty of to 4 1999
leaving to	owinke County Recorder!
4. The deceased and Affiant were mar of (This item applies only to the surviving	; and were never divorced.
and the same of th	s and funeral of the deceased have been paid;
and his/her estate have been p	ainst the estate of the decedent.
This Affidavit is made to induce First title insurance on the above-described	American Title Insurance Company to issue a policy of real estate.
9-29-99	Wellin Paly
Date	Signature of Affiant
	William Pabey William & Abey Printed Name of Affiant
State of Indiana, County of Lake	
Subscribed and sworn to September , 19	
Beth A. Kelbert Printed Name of Notary	Signature of Notary
My Commission expires: 07/11/01	
My County of Residence is:	DRUANNE M. BOCEK NOTARY PUBLIC STATE OF INDIANA Resident of Lake County
THIS INSTRUMENT WAS PREPARED BY:	My Commission Expires August 26, 2006
	000141

HO! D FOR FIRST AMERICAN TITLE

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ATTENTION EST being requested by fursue its statutor voluntary and there	TATE: The So y this state ag y responsibility will be no per	cial Security a ency in order by. Disclosure halty for refusa	t is to is al.	INDIANA	STATE CERT
Local No				RE CONFIDENTIAL I	
TYPE/PRINT IN	1 DECEASED-	NAME (FIELM) Luis		" . Pabey	
PERMANENT BLACK INK		URITY NUMBER 34-7817		Se. AGE—Lest Birthde (Years)	y <u>Sh U</u> Mo
DEAOK INK	8ª WAS DECED A U.S. VETE	ENT	86 YE	AR LAST SERVED IN ARMED FORCES?	HOSPITA
OCOCOCUT	1			street and number)	
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	India	па ізг. мын сц		Lake	E a
		CI No R	- Yes	WHAT COUNTI	M4
x - 1	46312	CXNo C	Yes	U.S.A.	AM
PARENTS		ictori		Pabeys	Doc
INFORMANT	20s. INFORMAN	TS NAME (Type/	Print	th	e L
	21s. MĚTHOO OI Donation	DISPOSITION Cremeton Other (Specif	☐ Re	nowel from State	21b. DA1
DISPOSITION	224 EMBALMER		ife	2	22b.
	24. SIGNATURE		RECTOR		
·	Jo	ln P.	ز ج	the	

E DEPARTMENT OF HEALTH

I DECEMBEU-	NAME (First Midd		CONFIDENTIAL PE			2. SEX		34: TIME OF DEAT	H 3b. DATE	E OF DEATH (Me	unds Day, Ye.)
			Pabey			Mal	Д	11:30p	Ju	ly 14,	1999
4. *SOCIAL SECT			AGE-Lest Birthday	Sh. UNDER I YEA	A 5c UNDER	DAY 6. DA		H (Mo. Day. Yr)		CE (City and Sta	ete er Foreign Country)
	4-7817		(Years) 88	Months Day	s Hours	Au	g.18	, 1910	Penue	las, Pi	uerto Ric
MA WAS DECED	ENT I	b YEAR	AST SERVED IN			ga PL/	CE OF DEA	TH (Check only on			
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No				<u>□ </u>	/Outpatient D	DA CITY TOW		Residence	led COL	UNTY OF DEATH	4
	ME (If not institution					East			I	Lake	
	8 Heml	-			120 DECEDENT			(Give kind of work t use retired)	126 KIND	OF BUSINESS/	INDUSTRY
10. MARITAL STA			VING SPOUSE give maiden name)		done during	most of works	OYCA	t use retired)	Inla	and St	eel Co.
Marri		J U a	<u>na Mena</u>	13e. CITY, TOWN, O		CTA T		STREET AND NU			***************************************
India			ke		Chicago			3528 E	lem100	ek Str	eet
	131. INSIDE CITY		14. CITIZEN OF	IS WAS DECEDEN	T OF HISPANIC OF	liGIN?		American Indian.		T. DECEDENT'S	
136. ZIP COUE	CI No B	Yes	WHAT COUNTRY	Mexican, Puerto	Yes (If yes, sp	ecify Cuban.	Sleck \	Vhite, etc.		scify only highest econdary (0-12)	College (1-4 or 5
	13g ON A FARM							ite	Elementary y	1	-
46312	cX _{No} D	100	U.S.A.	Puer	to Ric	IS MOTHER!		st Middle, Meiden S	Garanie)		
	ME (First Middle, L	/	nania in I	2001100	net in t			or Mora			
V 20s. INFORMANT	ictoria	and the second	Pabeys	20h MAILIN	NG ADDRESS (Stre	et and Number	or Rural Rou	te Number, City or	Town. State. Zip	Cade) 20c	Relationship
	z Burge		the		iga Plac				ND 463	12 D	aughter
21a. MÈTHOD OF		Entomb	ment	216 DATE AND PLA					te LOCATION	V—City or Town.	. Siate
		_	of from State	other place)	Tuly 19	, 199	9				
	Other (Specify)			F	Ridgela	wn Ce	mete	ry	Gary,		ana
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Jame	s H. F	ife		FD01	010795	Concession with the same	1	DARESS, AND LICE			
28. (DART I	arrest, shock, or he	injuries, or part failure.	complications that can List only one cause or	ised the death. Do not a each line.	nter nonspecific ter	- A	A 4 A . S	I'L E	D		Approximate Interval Between Onset and Deatl
MMEDIATE CAUS	E (Final		b. 1.001								
		b.		OR AS A CONSEQUEN			0	CI 041	309		
resulting in death) Conditions if any, w	i vhich gave	b		OR AS A CONSEQUEN			0	CT 04 1	809		
esuiting in desth) Conditions, if any, vise to the immediat tating the underlying	rhich gave a cause.	b. c	DUE TO (C	<i>[5]</i>	ICE OF)		O PE		000	tendentiale management	
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