STATE OF INDIANA

COUNTY OF LAKE

ESTATE OF

2020-024595

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD MICHAEL B BROWN RECORDER

LESLIE M. FULTON

**DECEASED** 

2020 May 5 8:34 AM

## SURVIVORSHIP AFFIDAVIT

On this 20th day of February, 2020 before me personally appeared CARON E. FULTON to me personally known, who being duly sworn on oath did say that:

- 1. Affiant is CARON E. FULTON, surviving spouse of LESLIE M. FULTON.
- 2. Affiant resides at 2259 Ridge Road, Lansing, IL 60438.
- 3. The subject premises are described as follows:

THE SOUTH 96 FEET OF THE NORTH 221 FEET OF BLOCK 1, IN INDUSTRIAL CENTER SUBDIVISION, IN THE TOWN OF GRIFFITH, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 17, PAGE 13, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Address:

835 N. Indiana Avenue, Griffith, IN 46319

Parcel no .:

45-07-35-132-003.000-006

- 4. Said premises were formerly owned by LESLIE M. FULTON and CARON E. FULTON as husband and wife.
- 5. LESLIE M. FULTON died in Lansing, Illinois on October 8, 2019. A copy of his Death Certificate is attached.
- 6. LESLIE M. FULTON and CARON E. FULTON were never divorced.

Affiant's Signature:

Printed Name:

Address

2259 Ridge Road, Lansing, IL 60438

MAY 04 2020

021725

SUBSCRIBED AND SWORN TO

BEFORE ME THIS 20TH DAY

OF FEBRUARY, 2020.

Margia I. Clara Notary Public

MARCIA L CLEGG Seal Notary Public – State of Indiana Lake County My Commission Expires Mar 6, 2025

I, Marcia L. Clegg, affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

Document Prepared by and mail to: Marcia L. Clegg CLEGG & FAULKNER, P. C. 15 Lawndale Street, Hammond, IN 46324 (219) 853-1851

## CERTIFICATION OF DEATH RECORD

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

	E		14 15					1.5	SEX	DATI	E OF DEATH	1	
LESLIE M FULTON							MALE	00	CTOBER	08, 2019			
COOK	AC	AGE AT LAST BIRTHDAY 82 YEARS					OF BIRTH INUARY 29, 1937						
CITY OR TOWN  LANSING			HOSPITAL OR 2259 RIDO				OTHER INSTITUTION NAME GE RD						
PLACE OF DEATH DECEDENT'S HON	ΛE												
BIRTHPLACE HAMMOND, IN			SECURITY NUMBER STATUS AT T MARRIED			ME OF DEATH	1199	SURVIVING SPOUSE/CIVIL UNION PARTNE			AIDEN NAME	EVER IN U.S ARMED	
RESIDENCE 2259 RIDGE RD			APT		NO	CITY OR T					INSIDE CITY LIMITS? YES		
COOK	STATE	ZIP CO 60438		HER/CO-PARE		RIOR TO FIRST MARRIAGE/CIVIL UNION			MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MAR THELMA WILHITE			FIRST MARRIAGE/CIVIL UNION	
INFORMANT'S NAME CARON FULTON	RELATIONSHIP WIFE					MAILING ADDRESS 2259 RIDGE RD, LANSING, IL, 60438							
METHOD OF DISPOSITION BURIAL			PLACE OF DISPOSITION OAK GLEN CEMETERY				Tab.	CATION - CITY OR TOWN AND STATE NSING, IL			DATE OF DISPOSITION OCTOBER 11, 2019		
FUNERAL HOME SCHROEDER-LAU	ER FUN	ERAL H				NSING, IL. 60							
								RECTOR'S ILLINOIS LICENSE NUMBER					
LOCAL REGISTRAR'S NAME DATE FILED W									WITH LOCA		<b>IAR</b>		
CAUSE OF DEATH IMMEDIATE CAUSE	PART I. a	ARRHYT	HMIA							<u> </u>	VEEN ATH	MINUTES	
(Final disease or condition resulting in death)	b	ATRIAL F	IBRILLAT	ION	Due to (	or as a consequence o	0:			APPROXIMA	SVAL BETWEE	YEARS	
	c.	CORONA	ARY ARTE	RY DISEAS		or as a consequence o	n			\\	INTERV	YEARS	
DADY II Form of the state						or as a consequence o	The second second second				The state of the s		
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I. WAS A											AN AUTOPSY PERFORMED? NO		
										RE AUTOPSY FINDINGS USED TO MPLETE CAUSE OF DEATH? N/A			
									MANNER OF	NNER OF DEATH ATURAL			
	TUS									NATURA	L		
	TUS		TIME	OF INJURY		PLACE OF INJU	RY			NATURA	L	INJURY AT WORK?	
NOT APPLICABLE DATE OF INJURY	TUS		TIME	OF INJURY		PLACE OF INJU	RY			NATURA	L	INJURY AT WORK?	
NOT APPLICABLE DATE OF INJURY LOCATION OF INJURY			TIME	OF INJURY		PLACE OF INJU	RY					INJURY AT WORK?  ATION INJURY, SPECIFY	
NOT APPLICABLE DATE OF INJURY LOCATION OF INJURY DESCRIBE HOW INJURY OF	CCURRED		EN ALIVE	Was		PLACE OF INJU		DATE P	RONOUNCED	IFT			
NOT APPLICABLE DATE OF INJURY LOCATION OF INJURY DESCRIBE HOW INJURY OF	CCURRED	E LAST SE	EN ALIVE	Was		EXAMINER OR		DATE P	RONOUNCED	IF T	RANSPORT	TIME OF DEATH	

1114618



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 Cook County Clerk

