NOT AN OFFICIAL DOCUMENT

FILED
Mar 31 2023 LM
PEGGY HOLINGA-KATONA
LAKE COUNTY AUDITOR

2023-509434
03/31/2023 10:06 AM
TOTAL FEES: 25.00
BY: SP
PG #: 3

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
GINA PIMENTEL
RECORDER

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

AFFIDAVIT OF SURVIVORSHIP

I, Carmen G. Ortiz, being duly sworn, state as follows:

1. I am over the age of eighteen (18) and suffer from no disability which would render my testimony incompetent.

2. Jose R. Ortiz and Carmen G. Ortiz are the owners in fee simple of the following described real estate located in Lake County, Indiana, more particularly described as follows:

Lot 79, Boulevard Estates third addition to the Town of Highland as per plat thereof recorded in Plat book 34, page 37, in the Office of the Recorder of Lake County, Indiana

Commonly Known As: 3728-44th Street, Highland, IN 46322

Affiant's Address: 3728-44th Street, Highland, IN 46322

Tax ID #45-07-27-453-012.000-026

3. Jose R. Ortiz and Carmen G. Ortiz acquired title to said real estate as Husband and Wife by Warranty Deed on the 17th day of February, 2009 and recorded in the Office of the Lake County Recorder on the 10th day of March, 2009 as Document No. 2009 014738.

4. Jose R. Ortiz died on April 5, 2022. See attached Death Certificate for Jose R. Ortiz.

5. The gross value of the estate of the decedent as determined for the purpose of Federal Estate Taxes was less than the value required for the filing of a Federal Estate Tax Return; therefore, the decedent's estate was not subject to Federal Estate Tax.

Carmen G. Ortiz, Affiant

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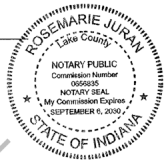
STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Before me, the undersigned, a Notary Public in and for said County and State, this 29th day of March, 2023 Personally appeared: Carmen G. Ortiz and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

Rosemarie Juran, Notary Public
My commission expires 9/6/2030
Resident of Lake County



Property of Lake County Recorder

I 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. /s/Gary P. Bonk

This Instrument Prepared By: Gary P. Bonk, Attorney at Law (Attorney No. 20519-45), (219) 864-7800
900 Parker Place, Suite A, Schererville, Indiana 46375

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CERTIFICATION CODE

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

STATE FILE NUMBER 2022 0034734 **DATE ISSUED** 4/8/2022

DECEDENT'S LEGAL NAME: JOSE R ORTIZ		SEX: MALE	DATE OF DEATH: APRIL 05, 2022
COUNTY OF DEATH: COOK	AGE AT LAST BIRTHDAY: 75 YEARS	DATE OF BIRTH: MAY 16, 1946	
CITY OR TOWN: CHICAGO	HOSPITAL OR OTHER INSTITUTION NAME: NORTHWESTERN MEMORIAL HOSPITAL		
PLACE OF DEATH: INPATIENT			
BIRTHPLACE: BARRANQUITAS, PR	SOCIAL SECURITY NUMBER / STATUS AT TIME OF DEATH: MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME: CARMEN G TORRES	EVER IN U.S. ARMED FORCES? NO
RESIDENCE: 3728 44TH STREET	APT. NO.	CITY OR TOWN: HIGHLAND	INSIDE CITY LIMITS? YES
COUNTY: LAKE	STATE: IN	ZIP CODE: 46322	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION: ALBERTO ORTIZ
MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION: MARIA RAMOS			
INFORMANT'S NAME: CARMEN G ORTIZ	RELATIONSHIP: WIFE	MAILING ADDRESS: 3728 44TH STREET, HIGHLAND, IN, 46322	
METHOD OF DISPOSITION: BURIAL	PLACE OF DISPOSITION: CALUMET PARK CEMETERY	LOCATION - CITY OR TOWN AND STATE: MERRILLVILLE, IN	DATE OF DISPOSITION: APRIL 12, 2022
FUNERAL HOME: BARON'S BURIALS INC., 13909 S KOSTNER AVE, CRESTWOOD, IL, 60418			
FUNERAL DIRECTOR'S NAME: STEPHANIE A BARON		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER: 034016703	
LOCAL REGISTRAR'S NAME: KAREN A YARBROUGH		DATE FILED WITH LOCAL REGISTRAR: APRIL 8, 2022	

CAUSE OF DEATH PART I. VASOGENIC CEREBRAL EDEMA

IMMEDIATE CAUSE (Final disease or condition resulting in death):
a. _____
Due to (or as a consequence of):
b. INTRAVENTRICULAR & INTRACEREBRAL HEMORRHAGE
Due to (or as a consequence of):
c. _____
Due to (or as a consequence of):

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

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? NO	DATE LAST SEEN ALIVE: UNKNOWN	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH: 10:04 AM
CERTIFIER: PHYSICIAN			DATE CERTIFIED: APRIL 07, 2022	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH: EINSTEIN, NOAH, 251 E HURON STREET, CHICAGO, ILLINOIS, 60611			PHYSICIAN'S LICENSE NUMBER: 036146653	

2155609

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

Property of Lake County Recorder

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE