

GINA PIMENTEL  
RECORDER

2023-032046

STATE OF INDIANA  
LAKE COUNTY  
RECORDED AS PRESENTED

9:15 AM 2023 Nov 29

Please send all tax bills to:

PARCEL NO. 45-12-16-402-001.000-030

Toya M. Moore  
597 West 73<sup>rd</sup> Avenue  
Merrillville, Indiana 46410

STATE OF INDIANA )  
 ) SS:  
COUNTY OF LAKE )

**AFFIDAVIT OF SURVIVORSHIP**

Toya M. Moore, surviving spouse of Delindus K. Moore, declares under her oath:

1. That Delindus K. Moore ("Decedent") died on February 24, 2023, while domiciled in Lake County, Indiana. A photocopy of Decedent's death certificate is herein attached as Exhibit A.

2. That, at the time of his death, Decedent owned the following real estate, together with Toya M. Moore, his surviving spouse:

Commonly known as: 597 West 73<sup>rd</sup> Avenue, Merrillville, Indiana 46410

Legally described as:

PART OF LOT 9 OF THE ONE-ACRE LOTS IN SECTION 16, TOWNSHIP 35 NORTH, RANGE 8 WEST OF THE 2<sup>ND</sup> PRINCIPAL MERIDIAN, DESCRIBED AS FOLLOWS: BEGINNING AT THE NORTHWEST CORNER OF SAID LOT 9 AND RUNNING THENCE EAST ALONG THE NORTH LINE OF SAID LOT 9 A DISTANCE OF 95 FEET; THENCE SOUTH PARALLEL WITH THE EAST OF SAID LOT 9 AS DISTANCE OF 171.95 FEET, THENCE WEST PARALLEL WITH THE NORTH LINE THEREOF, A DISTANCE OF 95 FEET; THENCE NORTH 171.95 FEET TO THE PLACE OF BEGINNING.

3. That although the "Special Warranty Deed", which was the last recorded deed for the aforementioned property, dated April 28, 2010 and recorded May 12, 2010 as document number 2010 027079 in the Office of the Recorder of Lake County, Indiana is silent as to how Decedent and Toya M. Moore took title to this property, they were married at the time of taking said title, having been married on August 20, 2001; therefore they took title as husband and wife, tenants by the entireties by operation of law pursuant to I.C. 32-17-3-1. A photocopy of the Marriage Certificate of Decedent and Toya M. Moore is herein attached as Exhibit B.

4. That, therefore, Toya M. Moore is entitled to delivery of the above-enumerated real property by operation of law.

WHEREFORE, the affiant herein hereby requests that the above-enumerated real property be transferred to same Toya M. Moore by operation of law.

I HEREBY AFFIRM, UNDER THE PENALTIES OF PERJURY, THAT THE FOREGOING REPRESENTATIONS ARE TRUE.

*Toya M. Moore*  
TOYA M. MOORE  
AFFIANT

STATE OF INDIANA )  
 ) SS:  
COUNTY OF LAKE )

Before me, a Notary Public, in and for said County and State, this November 28, 2023, personally appeared Toya M. Moore and acknowledged the execution of the foregoing instrument to be her free and voluntary act.

*Barbara A. Bedford*  
Notary Public

**FILED**

NOV 29 2023

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

This instrument prepared by:  
Sophia J. Arshad, Esq.

7899 Taft Street, Merrillville, Indiana, 46410; (219) 736-6500.

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.



*Handwritten initials and signatures*

# NOT AN OFFICIAL DOCUMENT

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

STATE FILE NUMBER 2023 0020713

DATE ISSUED 6/2/2023

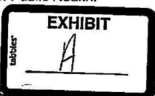
DECEDENT'S LEGAL NAME DELINDUS K MOORE			SEX MALE	DATE OF DEATH FEBRUARY 24, 2023	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 47 YEARS		DATE OF BIRTH FEBRUARY 25, 1975	
CITY OR TOWN CHICAGO			HOSPITAL OR OTHER INSTITUTION NAME NORTHWESTERN MEMORIAL HOSPITAL		
PLACE OF DEATH INPATIENT					
BIRTHPLACE GARY, IN	SOCIAL SECURITY NUMBER 	STATUS AT TIME OF DEATH MARRIED		SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME TOYIA MOORE	
RESIDENCE 597 WEST 73RD AVENUE		APT. NO.	CITY OR TOWN MERRILLVILLE		INSIDE CITY LIMITS? YES
COUNTY LAKE	STATE IN	ZIP CODE 46410	FATHER/MOTHER'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION KENNETH MOORE		MOTHER/MOTHER'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION TANYA ANDERSON
INFORMANT'S NAME TOYIA MOORE			RELATIONSHIP WIFE	MAILING ADDRESS 597 WEST 73RD AVENUE, MERRILLVILLE, IN, 46410	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION COLEMAND AND HICKS CREMATORY		LOCATION - CITY OR TOWN AND STATE MICHIGAN CITY, IN	DATE OF DISPOSITION MARCH 13, 2023
FUNERAL HOME D.L. PERKINS & SONS LLC, 2817 W ST CHARLES RD, BELLWOOD, IL, 60104					
FUNERAL DIRECTOR'S NAME SANTINA ELISE ALEXANDRA SPENCER				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016894	
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH				DATE FILED WITH LOCAL REGISTRAR MARCH 13, 2023	
CAUSE OF DEATH    PART I.    MRSA BLOOD STREAM INFECTION					
IMMEDIATE CAUSE (Final disease or condition resulting in death)					
a. _____ <small>Due to (or as a consequence of)</small>					
b. MRSA PERINEPHRIC HEMATOMA <small>Due to (or as a consequence of)</small>					
c. _____ <small>Due to (or as a consequence of)</small>					
<small>Due to (or as a consequence of)</small>					
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I. AAA WITH REPAIR, END STAGE RENAL DISEASE, GLOSTRIDIOIDES DIFFICILE, NON ISCHEMIC CARDIOMYOPATHY DUE TO AUTOMATIC IMPLANTABLE CARDIOVERTER DEFIBRILLATOR, PLEURAL EFFUSION RIGHT, TAKAYASU ARTERITIS, PULMONARY EMBOLISM DVT					
FEMALE PREGNANCY STATUS NOT APPLICABLE				WAS AN AUTOPSY PERFORMED? NO	
DATE OF INJURY				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
TIME OF INJURY				MANNER OF DEATH NATURAL	
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 FEBRUARY 24, 2023	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO		DATE PRONOUNCED	TIME OF DEATH 12:58 AM
CERTIFIER PHYSICIAN				DATE CERTIFIED FEBRUARY 24, 2023	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR. JOSE CASTELLANOS, 251 EAST HURON STRET, CHICAGO, ILLINOIS, 60611				PHYSICIAN'S LICENSE NUMBER 1245790377	

2529168



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*  
Karen A. Yarbrough  
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM

# NOT AN OFFICIAL DOCUMENT

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MOORE, DELINDUS K.

TO

MOORE, TOYIA M.

BE IT REMEMBERED, That heretofore, to wit:  
on the 29 day of August  
A.D. 2001, the following Marriage License was  
issued, to wit:

## MARRIAGE LICENSE

STATE OF INDIANA, LAKE COUNTY, ss:

To Any Person Empowered by Law to Solemnize Marriage -- Greetings:  
You are hereby authorized to join together as HUSBAND AND WIFE,  
MOORE, DELINDUS K. and MOORE, TOYIA M.  
according to the laws of the State of Indiana.

IN TESTIMONY WHEREOF, I ANNA N. ANTON  
Clerk of the Lake Circuit Court, hereunto subscribe my  
name and affix the seal of said court, at Crown Point,  
this 29 day of August, 2001

/s/ANNA N. ANTON

Clerk Lake Circuit Court

BE IT FURTHER REMEMBERED, That afterwards, to wit: on the, 17 day  
of September, 2001 the following Certificate of Marriage was filed in my office,  
to wit:

STATE OF INDIANA, LAKE COUNTY, ss:

THIS CERTIFIES, That I joined in Marriage as Husband and Wife  
MOORE, DELINDUS K. and MOORE, TOYIA M.  
on the 8 day of September, 2001

/s/LAWRENCE & DENISE OLIVER/PASTORS

STATE OF INDIANA, LAKE COUNTY, ss:

I, ANNA N. ANTON Clerk of the Circuit Court within and for  
said County of Lake, and State of Indiana, do hereby certify the foregoing to  
be true and correct, copies of the Marriage License and  
Certificate of Marriage of MOORE, DELINDUS K.\* & \*MOORE, TOYIA M.  
Male Born: February 25, 1975  
Female Born: May 25, 1978  
as the same now appear of record in the Marriage Records in my office.

IN WITNESS WHEREOF, I have hereto subscribed my name and  
affixed the seal of said court, at Crown Point, Indiana,  
on this 17 day of October, 2003

Anna N. Anton  
Clerk Lake Circuit Court

Deputy

EXHIBIT

B

NUMBER