



0010443736

AFFIDAVIT OF HEIRSHIP

PATRICIA LAWLOR, a resident of the Town of Woodridge, County of Cook and the State of Illinois, residing at 6632 Foxtree, Woodridge, Illinois 60517, she being duly sworn upon her oath states as follows:

1. That she is the one of the surviving children of MARGARET E. BOGUSZ and is familiar with her family history.

2. That MARGARET E. BOGUSZ died intestate on January 14th, 2000, at the age of seventy-nine years, in the City of Chicago, County of Cook and State of Illinois, being a resident of 5655 South Trumbull Avenue, Chicago, Illinois, for at least forty years prior to her death. That during her lifetime she was married twice and two times only. That the first marriage of MARGARET E. BOGUSZ was to John Lawlor, from whom she was divorced in 1955. That during said marriage, no children were adopted by her and only two children were born to her, namely:

- A. DENNIS J. LAWLOR (married to Lois Lawlor), a resident of Weston, Florida, and
- B. PATRICIA A. LAWLOR, this affiant, (divorced and not remarried), a resident of Woodridge, Illinois.

3. That the second marriage of MARGARET E. BOGUSZ was to JOSEPH F. BOGUSZ, who survived her as her surviving spouse. That no children were born to her or adopted by her during this marriage. That no children were adopted by her during her lifetime and only the two children enumerated above were born to her during her lifetime

4. That at the time of her death, MARGARET E. BOGUSZ was survived by:

- A. DENNIS J. LAWLOR, her son,
- B. PATRICIA A. LAWLOR, her daughter, and
- C. JOSEPH F. BOGUSZ, her surviving spouse,

P.N.T.N.

being all of her heirs and next of kin. All of the surviving heirs of MARGARET E. BOGUSZ are of legal age, competent and under no legal infirmity.

5. That during her lifetime, MARGARET E. BOGUSZ, did acquire title to certain real property in the City of Chicago, Cook County, Illinois, which property is legally described as follows:

BERNICK &

BERNICK, LTD.

ATTORNEYS-AT-LAW

5500 SOUTH

SAWYER AVENUE

CHICAGO,

ILLINOIS 60629

PHONE: (773) 434-4500

UNOFFICIAL COPY

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Lot 27 in John L. Sheridan's Resubdivision of Lots 18 to 27 in Block 1, of Lots 38 to 46 in Block 2 and Lots 5 to 24 in Block 3 and Lots 25 to 48 in Block 4 in Nash's Subdivision of the Northeast quarter of the West half of the Northeast quarter of Section 14, Township 38 North, Range 13, East of the Third Principal Meridian in Cook County, Illinois.

Common address: 5655 South Trumbull Avenue, Chicago, Illinois 60629

Permanent Tax (P.I.N.) Number: 19-14-208-019-0000

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That said real property was acquired by MARGARET E. BOGUSZ, then known as MARGARET E. LAWLOR, a divorced woman, she having not remarried at that time subsequent to her divorce from John Lawlor. That from the time of her acquisition of the property to the time of her death, MARGARET E. BOGUSZ, made no assignment, conveyance or other divestment of her interest in and to said real property.

6. That upon the death of MARGARET E. BOGUSZ, she having died intestate, the entire fee interest in said property passed to and vested in her heirs at law as follows:

An undivided one-half [1/2] interest in JOSEPH F. BOGUSZ, surviving spouse,
An undivided one fourth [1/4th] interest in DENNIS J. LAWLOR, her son; and
An undivided one-fourth [1/4th] interest in PATRICIA A. LAWLOR, her daughter.

7. That as a result of the death of MARGARET E. BOGUSZ, no probate proceedings were undertaken and none are contemplated. No death or succession taxes are payable. That MARGARET E. BOGUSZ was not a recipient of old age assistance, welfare assistance or any other form of public aid other than social security and medicare.

8. That Affiant further states that all of the debts, claims, expenses and demands of every kind and nature, including funeral, medical and hospital expenses incurred during the last illness and up to the date of the death of the decedent, MARGARET E. BOGUSZ, have been paid in full. That MARGARET E. BOGUSZ was not in any way bound in any form of lease or any other form of contract or verbal contract or obligation entered into by her during her lifetime, and further states that there are no obligations, debts, claims or liabilities of any kind now against her estate.

9. That on April 9, 2000, subsequent to the death of MARGARET E. BOGUSZ, her surviving spouse JOSEPH F. BOGUSZ, died a resident of Cook County, Illinois having resided at 5655 South Trumbull, the above described real property, from the time of his marriage to MARGARET E. BOGUSZ to the time of his death. That he died testate. Probate proceedings have been opened concerning his estate in the Circuit Court of Cook County, County Department, Probate Division under Cause Number 2000 P 4223 as memorialized in Docket 071 at Page 329. Pursuant to Petition and Notice as required, on May 18, 2000, an instrument purporting to be the Last Will and Testament of JOSEPH F. BOGUSZ was admitted to Probate. Letters of Office as Independent Executor were issued to EDWARD BOGUS upon the filing of his Oath and Bond (without surety) and their approval by the Court. Said will contains a power of sale.

UNOFFICIAL COPY

THAT THIS AFFIDAVIT is made to clear the chain of title and to induce any title insurance company to issue its title insurance policy covering the property above described guaranteeing title in:

The HEIRS AT LAW OF JOSEPH F. BOGUSZ, to an undivided one-half [1/2] interest,
DENNIS J. LAWLOR, to an undivided one-fourth [1/4th] interest, and
PATRICIA A. LAWLOR, to an undivided, one-fourth [1/4th] interest

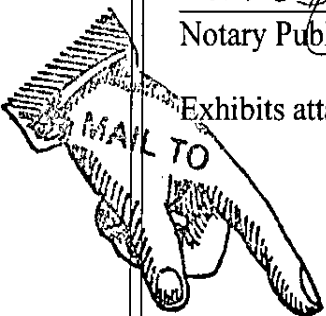
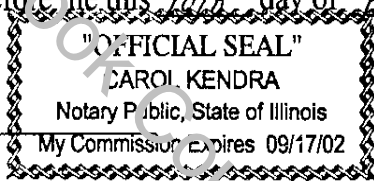
or their successors in interest, subject only to claims versus the ESTATE OF MARGARET E. BOGUSZ, claims and matters pending in the cause of the Probate of the ESTATE OF JOSEPH F. BOGUSZ and to building and building lines, easements, covenants, conditions and restrictions of record, if any, and taxes for the year 1999 and thereafter.

Further this Affiant sayeth not.


PATRICIA LAWLOR

Subscribed and sworn to before me this 10th day of APRIL, A.D., 2001


Notary Public



Exhibits attached: Death certificate of Margaret E. Bogusz
Death certificate of Joseph F. Bogusz
Certificate of Marriage of Joseph F. Bogusz and Margaret E. Lawlor
Letters of Office re Estate of Joseph F. Bogusz

THIS INSTRUMENT PREPARED BY:
ALAN J. BERNICK, Attorney-at-Law
5500 South Sawyer Avenue
Chicago, Illinois 60629
Phone: [773] 434-4500; FAX: [773] 436-8886

MAIL TO:
ALAN J. BERNICK, Attorney-at-Law, 5500 South Sawyer Avenue, Chicago, Illinois 60629

REGISTRATION DISTRICT NO. **1610**

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER
600864

DECEASED-NAME **MARGARET F. BOGUSZ** SEX **FEMALE** DATE OF DEATH (MONTH, DAY, YEAR) **JANUARY 14, 2000**

COUNTY OF DEATH **COOK** AGE-LAST BIRTHDAY (YRS) **52** UNDER 1 YEAR **1** DAY **10** HOURS **10** MIN **10** DATE OF BIRTH (MONTH, DAY, YEAR) **NOVEMBER 10, 1920**

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER **CHICAGO** HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) **HOLY CROSS HOSPITAL**

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) **Chicago, IL** MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) **8a. Married**

SPECIAL SECURITY NUMBER **353-05-0645** USUAL OCCUPATION **11a. Accountant/clerk** NAME OF SURVIVING SPOUSE (MARRIED NAME, IF WIFE) **8b. Joseph F. Bogusz**

RESIDENCE (STREET AND NUMBER) **5655 S. Trumbull** CITY, TOWN, TWP. OR ROAD DISTRICT NO. **Chicago** KIND OF BUSINESS OR INDUSTRY **11b. Manufacturing** EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) **12. 10**

FRONTIER-NAME **John** ZIP CODE **60629** RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) **14a. White** OF HISPANIC ORIGIN? (SPECIFY NO OR YES, IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) **13c. Yes**

INFORMANT'S NAME (TYPE OR PRINT) **17a. Joseph F. Bogusz** RELATIONSHIP **Husband** MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) **17c. 5655 S. Trumbull, Chicago, IL 60629**

DEATH CAUSE (FATAL DISEASE OR CONDITION OCCURRING IN DEATH) **18. Myocardial infarction**

CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a) **(a) Due to, or as a consequence of, acute myocardial infarction**

IMMEDIATE CAUSE (b) **(b) Due to, or as a consequence of, coronary artery disease**

CAUSE LAST (c) **(c) Due to, or as a consequence of, hypertension**

OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH (NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I) **(c) Hypertension**

MAJOR FINDINGS OF OPERATION **20b. Myocardial infarction**

OPERATION, IF ANY **20c. NO**

SPERDENT) ATTEND THE DECEASED (MONTH, DAY, YEAR) **21b. NO** WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO)

TO THE BEST OF MY KNOWLEDGE, OTHER OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED. **21c. 6:00 P.M.**

SIGNATURE **22a. [Signature]** DATE SIGNED (MONTH, DAY, YEAR) **22b. Jan. 15, 2000**

NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) **ASHRAF J. AHMED M.D.** ILLINOIS LICENSE NUMBER **22d. 036056500**

NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER) **CHICAGO, ILLINOIS 60629**

BURIAL, CREMATION, REMOVAL (SPECIFY) **24b. St. Adalbert** CEMETERY OR CREMATORY-NAME **24c. Niles** LOCATION **24d. Jan. 19, 2000**

FUNERAL HOME **25a. ZARZYCKI MANOR CHAPELS** STREET AND NUMBER OR R.F.D. **5088 S. Archer Ave.** CITY OR TOWN **Chicago** STATE **IL** ZIP **60632**

FUNERAL DIRECTOR'S SIGNATURE **Chaz Zarycki** FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER **034-010968**

LOCAL REGISTRAR'S SIGNATURE **[Signature]** DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) **JAN 18 2000**

26a. **26b. [Signature]**

VR200 (Rev. 5/89)

Illinois Department of Public Health—Division of Vital Records

(BASED ON 1989 U.S. STANDARD CERTIFICATE)

STATE OF ILLINOIS
 COUNTY OF COOK
 CITY OF CHICAGO

JAN 18 2000

I, **SHILLA LYNE, RSM, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO**, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO. THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN ORDINANCE OF SAID LAW AND ORDINANCES.

Shilla Lyne RSM
 LOCAL REGISTRAR

CITY OF CHICAGO
 DEPARTMENT OF PUBLIC HEALTH

THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

UNOFFICIAL COPY

I, DAVID ORR, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.

IN WITNESS THEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

David Orr
COUNTY CLERK

PERMANENT CERTIFICATE
 TEMPORARY CERTIFICATE

REGISTRATION DISTRICT NO. 16-92
REGISTERED NUMBER 480

138 APR 20

STATE OF ILLINOIS

STATE FILE NUMBER

MEDICAL EXAMINER'S - CORONER'S CERTIFICATE OF DEATH

Type, or Print in PERMANENT INK See Coroner's or Funeral Directors Handbook for INSTRUCTIONS

A DECEASED
B
C
D
E

PARENTS

CAUSE

N

P

H.G.

RIF

UNK

CERTIFIER

DISPOSITION

1. DECEASED-NAME FIRST MIDDLE LAST: JOSEPH F. BOGUSZ 2. SEX: MALE 3. DATE OF DEATH (MONTH, DAY, YEAR): APRIL 9, 2000

4. COUNTY OF DEATH: Cook 5a. AGE-LAST BIRTHDAY (YRS): 80 5b. UNDER 1 YEAR: 5c. UNDER 1 DAY: 5d. DATE OF BIRTH (MONTH, DAY, YEAR): March 10, 1920

6a. CITY, TOWN, TWP., OR ROAD DISTRICT NUMBER: Chicago 6b. HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER): LOYOLA U. AED CNTR 6c. IF HOSP. OR INST. INDICATE D.O.A., OP EMER. RM, INPATIENT (SPECIFY): INPT

7. BIRTHPLACE (CITY AND STATE OF FOREIGN COUNTRY): Chicago, IL 8a. MARRIED/NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Widowed 8b. NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE): none 9. WAS DECEASED EVER IN ARMED FORCES? (YES): YES

10. SOCIAL SECURITY NUMBER: 10.359-10-1657 11a. USUAL OCCUPATION: Delay Adjuster 11b. KIND OF BUSINESS OR INDUSTRY: Telephone 12. EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED): 12. 12

13a. RESIDENCE (STREET AND NUMBER): 5655 S. TRUMBULL 13b. CITY, TOWN, TWP., OR ROAD DISTRICT NO.: CHICAGO 13c. INSIDE CITY (YES/NO): YES 13d. COUNTY: Cook

13e. STATE: ILLINOIS 13f. ZIP CODE: 60629 14a. RACE (WHITE, BLACK, AMERICAN INDIAN, SPECIFY): WHITE 14b. OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, ETC.): NO

15. FATHER-NAME FIRST MIDDLE LAST: Frank Bogusz 16. MOTHER-NAME FIRST MIDDLE (MAIDEN) LAST: Jadwiga Wepisc

17a. INFORMANT'S NAME (TYPE OR PRINT): Patricia Lawlor 17b. RELATIONSHIP: step daughter 17c. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP): 6632 Foxtree Woodridge, IL 60517

18. PART I. Enter the diseases, injuries, 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

(a) CARBON MONOXIDE INTOXICATION
DUE TO, OR AS A CONSEQUENCE OF

(b) INHALATION OF SMOKE AND SOOT
DUE TO, OR AS A CONSEQUENCE OF

(c) HOUSE FIRE

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

19a. NATURAL, ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED (SPECIFY): ACCIDENT 19b. DATE OF INJURY (MONTH, DAY, YEAR): APR 9 2000 19c. HOUR: 3:00 19d. HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I OR PART II): FOUND IN BURNING HOUSE

20e. INJURY AT WORK (YES/NO): NO 20f. PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BUILDING, ETC.) (SPECIFY): HOME 20g. LOCATION (CITY, VIL OR TOWN; OR TWP., OR RD. DIST. NO., COUNTY, STATE): CHICAGO Cook ILLINOIS 20h. IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS (YES/NO): NO

21a. I CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INQUIRY, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT: 21b. THE DECEDENT WAS PRONOUNCED DEAD ON: APR 9 2000 21c. AT: 7:16 A.M.

22a. CORONER'S - MEDICAL EXAMINER'S SIGNATURE: G.A. Danogian, M.D. 22b. DATE SIGNED (MONTH, DAY, YEAR): APR 10 2000

23a. CORONER'S PHYSICIAN'S NAME (Type or Print): ALDO J. FUSARO, M.D. 23b. DATE SIGNED (MONTH, DAY, YEAR):

24a. BURIAL, CREMATION, REMOVAL (SPECIFY): Entombment 24b. CEMETERY OR CREMATORY-NAME: St Joachim MMG Mausoleum 24c. LOCATION (CITY OR TOWN, STATE): Niles Illinois 24d. DATE (MONTH, DAY, YEAR): April 13 2000

25a. FUNERAL HOME: Zarzycki Manor Chapels 5088 South Archer Avenue Chicago IL 60632-4546 25b. FUNERAL DIRECTOR'S SIGNATURE: Claudette A. Zarzycki 25c. FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER: 034-015211

26a. LOCAL REGISTRAR'S SIGNATURE: Billie Broadview, Illinois 60153 26b. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR): April 11, 2000

10443736
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LETTERS OF OFFICE - DECEDENT'S ESTATE

(Rev. 9-99 CCP-415)(PC.- Gen.)

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
County Department, Probate Division

Estate of

JOSEPH F. BOGUSZ

No. 2000 P 4223

Docket 71

Page 329

Deceased

LETTERS OF OFFICE - DECEDENT'S ESTATE

EDWARD BOGUSZ

has been appointed

Independent

Executor

of the estate of

JOSEPH F. BOGUSZ

, deceased,

who died April 09, 2000

, and is authorized to take possession of and collect the estate

the decedent and to do all acts required by law.

LS

Witness,

May 18, 2000

Aurelia Pucinski

Clerk of Court

CERTIFICATE

I certify that this is a copy of the letters of office now in force in the estate.

Witness,

June 28, 2000

MA

Aurelia Pucinski

Clerk of Court

AURELIA PUCINSKI, CLERK OF THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

10443736

ted
ate of
ased,
estate

CERTIFICATION OF VITAL RECORDS

COUNTY OF COOK
STATE OF ILLINOIS
OFFICE OF THE COUNTY CLERK
CERTIFICATION OF MARRIAGE

LICENSE NUMBER: 2846399-0

GROOM'S NAME: JOSEPH

AGE: 46

B E T W E E N

F .

E O S U S Z

BRIDE'S NAME: MARGARET

AGE: 45

A N D

LAWLOR

DATE OF MARRIAGE: JULY 09, 1966

O N

WERE UNITED IN MARRIAGE IN THE COUNTY OF COOK, AND STATE OF ILLINOIS

CIVIL

T N A

CEREMONY

B Y

NAME: EARL H. NEAL
OFFICIATE TITLE: JUDGE

PLACE OF MARRIAGE: CHICAGO, ILLINOIS

A T

DATE RECORDED:
APPLICATION DATED:

JULY 13, 1966
JULY 02, 1966

02344632

This is to certify that this is a true and correct abstract from the official record filed with the office of the Cook County Clerk.

ISSUED AT: COUNTY BUILDING
CHICAGO, ILLINOIS 60602-1304

03/08/2001

10:52

David D. Orr

DAVID D. ORR
COUNTY CLERK

This copy is not valid unless displaying embossed seals of Cook County and County Clerk signature

