

**AFFIDAVIT OF HEIRSHIP**

Estate of:



PHILIP R. SANTORO, Deceased and  
MABEL E. SANTORO, Deceased.

PHYLLIS J. JAMES, on oath says:

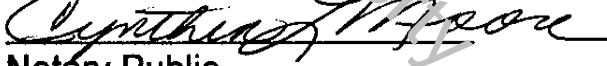
1. I am the daughter of PHILIP R. SANTORO and MABEL E. SANTORO, who are both deceased.
2. PHILIP R. SANTORO and MABEL E. SANTORO were each married once, to each other on June 8, 1929. Four children were born to the parties, namely: PHYLLIS J. JAMES, NANCY S. CHEVLIN, PHILIP R. SANTORO, JR. and ARLENE C. RIFFICE, who died on April 12, 1988.
3. PHILIP R. SANTORO died at Rest Haven South, South Holland, Illinois, on August 25, 1990 at the age of 89 years, as evidenced by the attached certified State of Illinois, Medical Certificate of Death.
4. At the time of his death, he owned real estate with MABEL E. SANTORO, his wife, in joint tenancy, commonly known as 16300 South School Street, South Holland, Illinois and legally described as follow: See attached Exhibit "A".
5. PHILIP R. SANTORO died testate, as evidenced by the attached certified copy of Last Will and Testament of PHILIP R. SANTORO.
6. MABEL E. SANTORO, died at Ingalls Memorial Hospital, Harvey, Illinois, on December 24, 1993 at the age of 84 years, as evidenced by the attached certified State of Illinois, Medical Certificate of Death.
7. MABEL E. SANTORO died testate, as evidenced by the attached certified copy of Last Will and Testament of MABEL E. SANTORO.
8. The heirs at the time of death of MABEL E. SANTORO are PHYLLIS JAMES, NANCY CHEVLIN, and PHILIP R. SANTORO, JR.

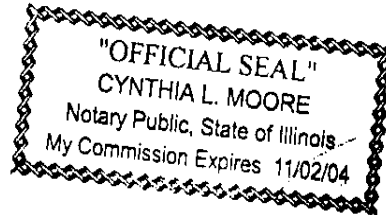
**UNOFFICIAL COPY** 10581654

9. This Affidavit is prepared by the Affiant and filed with the Cook County Recorder of Deeds for the purpose of establishing ownership of the property commonly known as 16300 South School Street, South Holland, Illinois, and legally described as follows: See attached Exhibit "A".

  
\_\_\_\_\_  
PHYLLIS J. JAMES

SUBSCRIBED and SWORN to  
before me this 17<sup>th</sup> day of  
May, 2001.

  
\_\_\_\_\_  
Notary Public



Address of property: 16300 South School Street, South Holland, Illinois

PIN No. 29-22-209-010

RETURN TO JOHNSON & JOHNSON, LTD., 17450 South Halsted,  
Homewood, Illinois 60430

# UNOFFICIAL COPY

10581654

EXHIBIT "A"

16300 South School Street,  
South Holland, Illinois 60473

LOT 89 IN HOEKSTRA'S SECOND ADDITION IN DUTCH VALLEY, BEING A  
SUBDIVISION IN THE NORTH EAST  $\frac{1}{4}$  OF SECTION 22, TOWNSHIP 36  
NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK  
COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16.0  
REGISTERED NUMBER

DECEASED-NAME: Philip R Santoro Sr. Mabel Lamie  
COUNTY OF DEATH: Cook  
DATE OF DEATH: August 25, 1990  
SEX: Male  
DATE OF BIRTH: July 15, 1901  
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: South Holland  
HOSPITAL OR OTHER INSTITUTION-NAME: Rest Haven South  
NAME OF SURVIVING SPOUSE: Mabel Lamie  
KIND OF BUSINESS OR INDUSTRY: C.F.D.  
SOCIAL SECURITY NUMBER: 358-26-8761  
RESIDENCE: 16300 School Street, South Holland, Cook  
RACE: White  
MOTHER-NAME: Carolina Rubino  
RELATIONSHIP: Wife  
Mailing Address: 16300 School St. So. Holland, IL 60473  
Cause of Death: (a) Renal Failure  
Underlying Cause: (b) Infected left Arm fistula, Arteriosclerotic Heart Disease, Atrial Fibrillation  
Major Findings of Operation: None

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death and record for the decedent named in item 1 and that this record was established and filed in accordance with the provisions of the Illinois statutes relating to the registration of births, stillbirths and deaths.  
DATE August 27, 1990  
SIGNED [Signature] At Cook County Department of Public Health  
1500 S. Maybrook Drive - Maywood, Illinois 60153  
Official Title: Chief Deputy Registrar

ILLINOIS DEPARTMENT OF PUBLIC HEALTH - DIVISION OF VITAL RECORDS

# UNOFFICIAL COPY

8031801

Property of Cook County Clerk's Office



STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. <b>1634</b>	DECEASED-NAME <b>Mabel</b>	FIRST MIDDLE LAST <b>F. Santoro</b>	SEX <b>Female</b>	DATE OF DEATH (MONTH, DAY, YEAR) <b>3. December 24, 1993</b>
REGISTERED NUMBER	COUNTY OF DEATH <b>Cook</b>	AGE-LAST BIRTHDAY (YRS) MOS. DAYS HOURS MIN <b>84</b>	DATE OF BIRTH (MONTH, DAY, YEAR) <b>5d. July 14, 1909</b>	DATE OF DEATH (MONTH, DAY, YEAR)
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER <b>Harvey</b>	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) <b>Ingalls Memorial Hospital</b>	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) <b>Ingalls Memorial Hospital</b>	6c. DOA	6c. DOA
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) <b>Chicago, Ill.</b>	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) <b>Widowed</b>	NAME OF SURVIVING SPOUSE (W/MEN /AME, IF WIFE) <b>None</b>	9. No	9. No
SOCIAL SECURITY NUMBER <b>326-20-7121</b>	USUAL OCCUPATION <b>Homemaker</b>	KIND OF BUSINESS OR INDUSTRY <b>Own Home</b>	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) Elementary/Secondary (0-12) <b>8 Yrs.</b>	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) College (1-4 or 5+)
RESIDENCE (STREET AND NUMBER) <b>16300 School Street</b>	CITY, TOWN, TWP. OR ROAD DISTRICT NO. <b>South Holland</b>	CITY, TOWN, TWP. OR ROAD DISTRICT NO. <b>South Holland</b>	INSIDE CITY (YES/NO) <b>Yes</b>	COUNTY <b>Cook</b>
STATE <b>Illinois</b>	RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) <b>White</b>	14b. X NO <input type="checkbox"/> YES <input type="checkbox"/> SPECIFY: MOTHER-NAME FIRST MIDDLE LAST <b>Arthur Lamie Tebbins</b>	14c. Yes <input type="checkbox"/> No <input type="checkbox"/>	14c. Yes <input type="checkbox"/> No <input type="checkbox"/>
FATHER-NAME FIRST MIDDLE LAST <b>Arthur Lamie Tebbins</b>	RELATIONSHIP <b>Daughter</b>	MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) <b>17707 Oakley, Lansing Illinois 68928</b>	16. <b>Hazel Tebbins</b>	16. <b>Hazel Tebbins</b>
INFORMANT'S NAME (TYPE OR PRINT) <b>Phyllis James</b>	17a. <b>Phyllis James</b>	17b. <b>Phyllis James</b>	17c. <b>Phyllis James</b>	17c. <b>Phyllis James</b>
18. PART I. Immediate Cause (Final disease or condition resulting in death) <b>Acute Myocardial Infarction</b>	Enter the diseases, or complications in it, 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.			
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. <b>AS A CONSEQUENCE OF</b>	(a) DUE TO, OR AS A CONSEQUENCE OF			
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I. <b>D.M.D.</b>	(b) DUE TO, OR AS A CONSEQUENCE OF			
MAJOR FINDINGS OF OPERATION <b>D.M.D.</b>	(c) DUE TO, OR AS A CONSEQUENCE OF			
DATE OF OPERATION, IF ANY <b>11/6/93</b>	MAJOR FINDINGS OF OPERATION			
20a. (1)(D) (SIGNATURE) OF THE DECEASED AND LAST SAID HIM/HER ALIVE ON <b>11/6/93</b>	20b. (1)(D) (SIGNATURE) OF THE DECEASED AND LAST SAID HIM/HER ALIVE ON			
21a. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED. <b>Harvey, Ill.</b>	21b. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
22. SIGNATURE AND ADDRESS OF CERTIFIER <b>Gerard Gnade Jr. MD, 71 W. 156th St., Harvey, IL 60426</b>	22. SIGNATURE AND ADDRESS OF CERTIFIER			
23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER	23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER			
BURIAL CREMATION, REMOVAL (SPECIFY) <b>Burial</b>	CITY OR TOWN <b>Glenwood, Ill.</b>	STATE <b>Ill.</b>	DATE (MONTH, DAY, YEAR) <b>Dec. 29, 1993</b>	DATE (MONTH, DAY, YEAR)
FUNERAL HOME <b>Thornridge Funeral Home, 15801 S. Cottage Grove, Dolton Ill. 60419</b>	STREET AND NUMBER OR R.F.D. <b>15801 S. Cottage Grove, Dolton Ill. 60419</b>	CITY OR TOWN <b>Dolton, Ill.</b>	STATE <b>Ill.</b>	DATE (MONTH, DAY, YEAR) <b>Dec. 29, 1993</b>
FUNERAL DIRECTOR'S SIGNATURE <b>Thornridge Funeral Home</b>	FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER <b>034-010145</b>	DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) <b>10-28-93</b>	DATE (MONTH, DAY, YEAR) <b>Dec. 29, 1993</b>	DATE (MONTH, DAY, YEAR)
LOCAL REGISTRAR'S SIGNATURE <b>Thornridge Funeral Home</b>	DATE (MONTH, DAY, YEAR) <b>10-28-93</b>	DATE (MONTH, DAY, YEAR) <b>Dec. 29, 1993</b>	DATE (MONTH, DAY, YEAR) <b>Dec. 29, 1993</b>	DATE (MONTH, DAY, YEAR)
26a. LOCAL REGISTRAR'S SIGNATURE	DATE (MONTH, DAY, YEAR)	DATE (MONTH, DAY, YEAR)	DATE (MONTH, DAY, YEAR)	DATE (MONTH, DAY, YEAR)

I HEREBY CERTIFY THAT the foregoing is true and correct copy of the DEATH record for the person named therein and that this record was established and filed in my office in accordance with provisions of the ILLINOIS STATUTES relating to the registration of BIRTHS, STILLBORNS, AND DEATHS.

DATED **DEC 28 1993** SIGNED *[Signature]* LOCAL REGISTRAR AT HARVEY, ILLINOIS.

The original of this record is permanently filed with the Illinois Dept. of Public Health in Springfield, Illinois. County Clerks and Local Registrars are authorized to make certification from copies of the original record. The Illinois Statutes further provided that certification of a DEATH record by the Dept. of Public Health of the Local Registrar of the County Clerk shall be prima facis evidence in all courts and places of the facts therein stated.





# UNOFFICIAL COPY

1058165A

Property of Cook County Clerk's Office

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS  
PROBATE DIVISION

I HEREBY CERTIFY THAT THE DOCUMENT TO WHICH  
THIS CERTIFICATION IS AFFIXED IS A TRUE AND  
CORRECT COPY OF AN INSTRUMENT IN WRITING  
PURPORTING TO BE THE LAST WILL AND TESTAMENT  
OF Philip R. Santoro

DECEASED, FILED IN THE OFFICE OF THE CLERK OF  
THE CIRCUIT COURT OF COOK COUNTY, PROBATE

DIVISION ON Jan 19, 1994

Jan 20, 1994  
Adriana Kucinski  
CLERK OF THE CIRCUIT COURT  
OF COOK COUNTY, ILLINOIS



LAST WILL AND TESTAMENT

OF

10581654

PHILIP R. SANTORO

I, PHILIP R. SANTORO, of the Village of South Holland, County of Cook and State of Illinois, being of sound mind and memory, declare this to be my Last Will and Testament, and I revoke all former wills and codicils that I may have made.

ARTICLE I

The expenses of my last illness, my funeral and the administration of my estate, wherever situated, and taxes payable by reason of my death, including interest and penalties, shall be paid out of and charged generally against the principal of my residuary estate without apportionment or proration, also, the sum of TWENTY-SEVEN THOUSAND DOLLARS (\$27,000.00) shall be paid to PHYLLIS J. SANKO, my daughter, for a debt that I owe her, if said debt is not paid prior to my death.

ARTICLE II

I hereby make the following specific bequest to ARLENE C. RIFFICE, my daughter, the sum of TEN DOLLARS (\$10.00).

ARTICLE III

I hereby give all my residuary estate, being all real and personal property, wherever situated, in which I may have any interest at the time of my death not otherwise effectively disposed of, as follows:

1. To MABEL E. SANTORO, my wife, if she survives me for thirty days or,

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*Philip R. Santoro*

# UNOFFICIAL COPY

10581654

2. If my wife does not survive me for thirty days, to PHYLLIS J. SANKO, NANCY S. CHEVLIN and PHILIP R. SANTORO, JR., my children, in equal shares, per stirpes.

## ARTICLE IV

1. I hereby appoint MABEL E. SANTORO, my wife, to be Executor of this Last Will and Testament, to serve without security on her bond.

2. If my wife dies, resigns, fails to qualify or is unable to act, I hereby appoint PHYLLIS J. SANKO, my daughter, as Executor in her place.

3. If the appointment of an Executor of my estate is necessary or desirable in any jurisdiction in which my principal Executor is unable or unwilling to act, I hereby appoint as my Executor in that jurisdiction such individual or corporation as may be designated in an instrument signed by my principal Executor, to act without bond and to have all the powers and discretion with respect to my estate in that jurisdiction during administration that my principal Executor is given with respect to the balance of my estate, to be exercised without court order.

4. My Executor shall have the following powers, and any others that may be granted by law, to be exercised in her discretion without court order:

- a. To retain any property of my estate;
- b. To invest in any property, real or personal;
- c. To sell any real or personal property of my estate, for cash or on credit, at public or private sale; to exchange any such property for other property; to grant options to purchase or acquire any such property; and to determine the prices and terms of sales, exchanges and options;
- d. To operate, maintain, repair, rehabilitate, alter, improve or remove any improvements on real estate; to make leases and subleases for terms of any length; to

*Philip R. Santoro*

# UNOFFICIAL COPY

10581654

subdivide real estate; to grant easements, give consents and make contracts relating to real estate or its use; and to release or dedicate any interest in real estate;

e. To employ attorneys, auditors, depositaries and agents with or without discretionary powers; to exercise in person or by proxy all voting and other rights with respect to stocks or other securities; and to keep any property in bearer form or in the name of an Executor, a nominee of an Executor, or a nominee of the depositary used by an Executor, with or without disclosure of any fiduciary relationship;

f. To collect, pay, contest, compromise or abandon claims of or against my estate wherever situated; and to execute contracts, conveyances and other instruments, including instruments containing covenants, representations and warranties binding upon and creating a charge against my estate and containing provisions excluding personal liability;

g. To enter into any transaction authorized by this Article with Trustees, Executors or Administrators of any trust or estate in which any beneficiary has any interest even though any such Trustee or representative is also my Executor;

h. To make any distribution or division of my estate in cash or in kind or both;

i. To allocate different kinds or disproportionate shares of property or undivided interests in property among the beneficiaries, and to determine the value of any such property;

j. To borrow money for any purpose either from my Executor, other than in the capacity of Executor, or from others, and to mortgage or pledge any property of my estate.

IN WITNESS WHEREOF, I have set my hand and seal to this, my Last Will and Testament, consisting of four (4) typewritten pages, the following page included, this 13 day of December, 1984.

*Philip R. Santoro* (SEAL)  
PHILIP R. SANTORO

*Philip R. Santoro*

LAST WILL AND TESTAMENT

OF

MABEL E. SANTORO

10581654

I, MABEL E. SANTORO, of the Village of South Holland, County of Cook and State of Illinois, being of sound mind and memory, declare this to be my Last Will and Testament, and I revoke all former wills and codicils that I may have made.

ARTICLE I

The expenses of my last illness, my funeral and the administration of my estate, wherever situated, and taxes payable by reason of my death, including interest and penalties, shall be paid out of and charged generally against the principal of my residuary estate without apportionment or proration, also, the sum of TWENTY-SEVEN THOUSAND DOLLARS (\$27,000.00) shall be paid to PHYLLIS J. SANKO, my daughter, for a debt that I owe her, if said debt is not paid prior to my death.

ARTICLE II

I hereby make the following specific bequest to ARLENE C. RIFFICE, my daughter, the sum of TEN DOLLARS (\$10.00).

ARTICLE III

I hereby give all my residuary estate, being all real and personal property, wherever situated, in which I may have any interest at the time of my death not otherwise effectively disposed of, as follows:

1. To PHILIP R. SANTORO, my husband, if he survives me for thirty days or,

Mabel E. Santoro

94W2 1155

# UNOFFICIAL COPY

10581654

2. If my husband does not survive me for thirty days, to PHYLLIS J. SANKO, NANCY S. CHEVLIN and PHILIP R. SANTORO, JR., my children, in equal shares, per stirpes.

## ARTICLE IV

1. I hereby appoint PHILIP R. SANTORO, my husband, to be Executor of this Last Will and Testament, to serve without security on his bond.

2. If my husband dies, resigns, fails to qualify or is unable to act, I hereby appoint PHYLLIS J. SANKO, my daughter, as Executor in his place.

3. If the appointment of an Executor of my estate is necessary or desirable in any jurisdiction in which my principal Executor is unable or unwilling to act, I hereby appoint as my Executor in that jurisdiction such individual or corporation as may be designated in an instrument signed by my principal Executor, to act without bond and to have all the powers and discretion with respect to my estate in that jurisdiction during administration that my principal Executor is given with respect to the balance of my estate, to be exercised without court order.

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- a. To retain any property of my estate;
- b. To invest in any property, real or personal;
- c. To sell any real or personal property of my estate, for cash or on credit, at public or private sale; to exchange any such property for other property; to grant options to purchase or acquire any such property; and to determine the prices and terms of sales, exchanges and options;
- d. To operate, maintain, repair, rehabilitate, alter, improve or remove any improvements on real estate; to make leases and subleases for terms of any length; to

*Mabel P. Santoro*



# UNOFFICIAL COPY

10581654

subdivide real estate; to grant easements, give consents and make contracts relating to real estate or its use; and to release or dedicate any interest in real estate;

e. To employ attorneys, auditors, depositaries and agents with or without discretionary powers; to exercise in person or by proxy all voting and other rights with respect to stocks or other securities; and to keep any property in bearer form or in the name of an Executor, a nominee of an Executor, or a nominee of the depositary used by an Executor, with or without disclosure of any fiduciary relationship;

f. To collect, pay, contest, compromise or abandon claims of or against my estate wherever situated; and to execute contracts, conveyances and other instruments, including instruments containing covenants, representations and warranties binding upon and creating a charge against my estate and containing provisions excluding personal liability;

g. To enter into any transaction authorized by this Article with Trustees, Executors or Administrators of any trust or estate in which any beneficiary has any interest even though any such Trustee or representative is also my Executor;

h. To make any distribution or division of my estate in cash or in kind or both;

i. To allocate different kinds or disproportionate shares of property or undivided interests in property among the beneficiaries, and to determine the value of any such property;

j. To borrow money for any purpose either from my Executor, other than in the capacity of Executor, or from others, and to mortgage or pledge any property of my estate.

IN WITNESS WHEREOF, I have set my hand and seal to this, my Last Will and Testament, consisting of four (4) typewritten pages, the following page included, this 13 day of December, 1984.

Mabel E. Santoro (SEAL)  
MABEL E. SANTORO





# UNOFFICIAL COPY

62118011

10581654

Property of Cook County Clerk's Office

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS  
PROBATE DIVISION

I HEREBY CERTIFY THAT THE DOCUMENT TO WHICH  
THIS CERTIFICATION IS APPLIED IS A TRUE AND  
CORRECT COPY OF AN INSTRUMENT IN WRITING  
PURPORTING TO BE THE LAST WILL AND TESTAMENT  
OF Mabel E. Santoro

DECEASED, FILED IN THE OFFICE OF THE CLERK OF  
THE CIRCUIT COURT OF COOK COUNTY, PROBATE

DIVISION ON Jan. 19, 1994

Jan. 20, 1994  
Aurelia Pucinski  
CLERK OF THE CIRCUIT COURT  
OF COOK COUNTY, ILLINOIS