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AFFIDAVIT OF HEIRSHIP

The undersigned affiant, Maureen Calcaterra, being duly sworn, on oath says, and also covenants the following:

- a. That the date of death for Cyril F. Lee was November 22, 1997.
- b. That the decedent was the owner of the land.
- c. That the value of the decedent's estate for Federal Tax purposes is \$145,000.00
- d. That the decedent died testate or intestate.
If testate was it probated?
- e. That the number of times the decedent was married was once.
- f. The name of each spouse was and also it states whether the marriage ended by death or dissolution. George A. Lee died.
- g. That the number of children born of their marriage was one.
- h. That the number of adopted children was none.
- i. That the above listed children are competent.
- j. That the name of all our children are and their marital status is Maureen Calcaterra married to Michael Calcaterra.
- k. That the age of children are: _____
- l. That the children listed above are the children from the decedent.
- m. That the children listed above are born of the deceased.



Doc#: 0514635206
Eugene "Gene" Moore Fee: \$50.00
Cook County Recorder of Deeds
Date: 05/26/2005 09:32 AM Pg: 1 of 3

I the affiant, Maureen Calcaterra certify that the above information is true and correct.

Maureen Calcaterra

4/18/05
Date

P
3LC

[Signature]
Notary Public

My commission expires on _____



mail to: fprepar@by: Bohm Mann 15127 So. 73rd Ave Suite F, Orland Park, IL 60462

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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 my office in accordance with the provisions of the Illinois statutes relating to the registration of births, stillbirths, and deaths.

DATE November 25, 1997
At Cook County Dept. of Public Health
1010 Lake Street
Oak Park, IL 60301

SIGNED *Regina Janek*
Official Title Chief Deputy Registrar

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS

STATE FILE NUMBER

REGISTRATION DISTRICT NO. 16.0	REGISTERED NUMBER	DECLASSED-NAME	FIRST	MIDDLE	LAST	SEX	DATE OF DEATH (MONTH, DAY, YEAR)
			Cyrl		Lee	Male	November 22, 1997
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	AGE (LAST BIRTHDAY) (YES) 5a.	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN OTHER, GIVE STREET AND NUMBER) 5b.	UNDECEASED (YES) 5c.	UNDERTAKEN (YES) 5d.	WEDDING (YES) 5e.	DATE OF BIRTH (MONTH, DAY, YEAR)	18-1918
6a. Palos Heights	6b. Palos Community Hospital	NAME OF SURVIVING SPOUSE (MARRIAGE, E.T.W. etc.)					OR INST. INDICATE P.O.A. OPERATED BY, INVA. TENT (SPECIFY)
7. Chicago, IL	8a. Widowed	8b. NAME OF BUSINESS OR INDUSTRY	8c. (MARRIAGE, E.T.W. etc.)				9. DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)
10. 351-10-7829	11a. Machinist	11b. KIND OF BUSINESS OR INDUSTRY	11c. (MARRIAGE, E.T.W. etc.)				12. INSIDE CITY (YES/NO)
13a. 16807 81st AVE	13b. ZIP CODE 60477-1411	13c. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	13d. INSIDE CITY (YES/NO)				13e. COUNTY COOK
13e. 1131	13f. RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY)	13g. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	13h. INSIDE CITY (YES/NO)				13i. COUNTY COOK
13g. 1131	13h. White	13i. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	13j. INSIDE CITY (YES/NO)				13k. COUNTY COOK
14. FATHER-NAME: GEORGE A	14a. MOTHER-NAME: LEE	14b. MOTHER-NAME: MARY M	14c. MOTHER-NAME: MARY M				14d. COUNTY COOK
15. INFORMANT'S NAME (TYPE OF FRIEND)	16. RELATIONSHIP	17a. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)	17b. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)				17c. COUNTY COOK
17a. MAUREEN CALCALOTTA	17b. Daughter	17c. 11846 California Trail Chicago Park, IL 60637	17d. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)				17e. COUNTY COOK
18. PART I. Immediate Cause (Final disease or condition resulting in death)	(a) DUE TO, OR AS A CONSEQUENCE OF	(b) DUE TO, OR AS A CONSEQUENCE OF	(c) DUE TO, OR AS A CONSEQUENCE OF				19. AUTOPSY (YES/NO)
Myocardial Infarction							20. IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? NO
20a. DATE OF OPERATION, IF ANY	20b. MAJOR FINDINGS OF OPERATION	20c. DATE OF OPERATION, IF ANY	20d. MAJOR FINDINGS OF OPERATION				20e. IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? NO
20a. 11/17/97	20b. Myocardial Infarction	20c. 11/24/97	20d. Myocardial Infarction				20e. IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? NO
21a. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.	21b. WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO)	21c. HOUR OF DEATH	21d. DATE SIGNED (MONTH, DAY, YEAR)				21e. DATE SIGNED (MONTH, DAY, YEAR)
21a. 11/24/97	21b. NO	21c. 12:50 PM	21d. 11/24/97				21e. 11/24/97
22a. SIGNATURE	22b. ILLINOIS LICENSE NUMBER	22c. DATE SIGNED (MONTH, DAY, YEAR)	22d. ILLINOIS LICENSE NUMBER				22e. DATE SIGNED (MONTH, DAY, YEAR)
22a. <i>Regina Janek</i>	22b. 036073267	22c. 11/24/97	22d. 036073267				22e. 11/24/97
23. NAME OF AT-TENDING PHYSICIAN	23a. NAME OF AT-TENDING PHYSICIAN	23b. NAME OF AT-TENDING PHYSICIAN	23c. NAME OF AT-TENDING PHYSICIAN				23d. NAME OF AT-TENDING PHYSICIAN
23. Dr. Robert J. Miller	23a. Dr. Robert J. Miller	23b. Dr. Robert J. Miller	23c. Dr. Robert J. Miller				23d. Dr. Robert J. Miller
24. BURIAL, CREMATION, REMOVAL (SPECIFY)	24a. CEMETERY OR CREMATORY-NAME	24b. LOCATION	24c. CITY OR TOWN				24d. STATE
24. Burial	24a. Holy Sepulchre Cemetery	24b. Worth, IL	24c. Worth, IL				24d. STATE
25a. FUNERAL HOME	25b. FUNERAL DIRECTOR'S SIGNATURE	25c. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)	25d. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)				25e. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
25a. Donnellan Funeral Home, 10525 S. Western Avenue, Chicago, Illinois 60643	25b. <i>Donnellan</i>	25c. 03A-011049	25d. 03A-011049				25e. 03A-011049
26a. REGISTRAR	26b. REGISTRAR	26c. REGISTRAR	26d. REGISTRAR				26e. REGISTRAR
26a. <i>R. Scott</i>	26b. <i>R. Scott</i>	26c. <i>R. Scott</i>	26d. <i>R. Scott</i>				26e. <i>R. Scott</i>

Illinois (Rev. 5-89) Division of Vital Records

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LEGAL DESCRIPTION

UNIT 2-S AND P2-S LOT 79 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN CHERRY CREEK CONDOMINIUM III CONDOMINIUM AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NUMBER 85179907, IN THE NORTHEAST 1/4 OF SECTION 26, TOWNSHIP 36 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

27-26-203-048-1015/1071

Property of Cook County Clerk's Office