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0612905286

Doc#: 0612905286 Fee: \$30.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 05/09/2006 02:43 PM Pg: 1 of 4

MAIL TO:
RESIDENTIAL TITLE SERVICES
1910 S. HIGHLAND AVE.
SUITE 202
LOMBARD, IL 60148

Space above this line for Recorder's use only

AFFIDAVIT OF HEIRSHIP

40

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STATE OF ILLINOIS

COUNTY OF Cook ss.

AFFIDAVIT OF HEIRSHIP

File No. R1187308

NOW COMES the affiant, Colette Maria Ray, being first duly sworn on oath and states:

1. That Lillie Mae Cathey, died at Brentwood Nursing Home on August 22, 2002, ~~2000~~ at the age of 84 years.

2. That the affiant is a friend of the decedent, and is of legal age and resides at 51 Willow Road, Matteson, IL 60443, and has knowledge as to the Decedent's heirship.

3. That the Decedent was the owner of the property commonly known as 7449 SOUTH INDIANA AVENUE, CHICAGO, IL 60619

and described on the attached Exhibit "A".

4. (A) That Decedent X was not married / was married to n/a and n/a predeceased the Decedent.

(B) That the gross estate of the Decedent was less than \$ 230,000.00 in value.

5. The following children were born to the decedent of the marriage to n/a, none were adopted, and there were no other children born to or adopted by said decedent:

	(Person)	(Relationship)	(Competency)
1.	<u>n/a</u>	<u> </u>	<u> </u>
2.	<u>n/a</u>	<u> </u>	<u> </u>
3.	<u>n/a</u>	<u> </u>	<u> </u>
4.	<u>n/a</u>	<u> </u>	<u> </u>

6. The following heirs are known to the affiant to have a possible vested interest in the subject property:

	(Person)	(Relationship)	(Competency)
1.	<u>Jerome Cathey</u>	<u>Nephew</u>	<u>100</u>
2.	<u>n/a</u>	<u> </u>	<u> </u>
3.	<u>n/a</u>	<u> </u>	<u> </u>

[Signature]
Affiant

Subscribed and sworn to before me this 22 day of March, ~~2005~~ 2006.

"OFFICIAL SEAL"
JESSICA PEARSON CAIN
NOTARY PUBLIC, STATE OF ILLINOIS
COMMISSION EXPIRES 11/18/2009
[Signature]

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MAR-24-2006 10:13A FROM:

At Cook County Department of Public Health Official Title Deputy Registrar
1010 Lake Street Suite 300 Oak Park, Illinois 60301

Date AUG 27 2002

Signed *Madame the Currier*

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent in item 1 and that this record was established and filed in my office in accordance with the provisions of Illinois statutes relating to the registrar of birth, stillbirth and death.

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 11

REGISTRATION DISTRICT NO 16.0
REG STERED NUMBER

DECEASED-NAME FIRST MIDDLE LAST SEX DATE OF BIRTH (MONTH DAY YEAR)
1 LILLIE COOK CATHY Female 08-23-02
2
EDUCATION (SEE FOOTNOTES) 12 12th 13d
CITY, TOWN, TWP, OR ROAD AND DISTRICT NO 11a Laborer 11b General 13d Cook
HOSPITAL BROTHER INSTITUTION-NAME (PATIENT NUMBER, ROOM NUMBER AND WARD) 6d Patient

1 LILLIE COOK
CITY, TOWN, TWP, OR ROAD AND DISTRICT NO 11a Laborer 11b General 13d Cook
HOSPITAL BROTHER INSTITUTION-NAME (PATIENT NUMBER, ROOM NUMBER AND WARD) 6d Patient

6a Burbank 6b Brentwood Nursing Home
BIRTHPLACE (CITY AND STATE) MARRIED, NEVER MARRIED, DIVORCED, SEPARATED, WIDOWED, DIVORCED (SPECIFY)
Z Marshall, IL Ba Never Married
SOCIAL SECURITY NUMBER 321-22-2371 USUAL OCCUPATION 11a Laborer 11b General 13d Cook
RESIDENCE (STREET AND NUMBER) 10 321-22-2371 CITY, TOWN, TWP, OR ROAD DISTRICT NO 11a Laborer 11b General 13d Cook

13a Illinois 13b Chicago
STATE ZIP CODE RACE (WHITE, BLACK, AMERICAN INDIAN, HAWAIIAN, OTHER SPECIFY) 14a MARRIAGE 14b SEX 14c YES 14d SPECIFY
60619 11a Black 14b General 14c YES 14d MIDDLE
FATHER-NAME FIRST MIDDLE LAST MOTHER-NAME FIRST MIDDLE MIDDLE
Van Cately Izella Greenwood

17a Michael Cately MARRIAGE 17b 7449 South Indiana Chgo, Ill
18 PART I Enter the diagnosis or complication that caused the death. Do not enter a tickle of dying, such as apnea or respiratory arrest. shock, or heart failure. List only one cause on each line.
(a) Death
(b) Peck
(c) Cause of death

20a 20b 20c 20d
DATE OF OPERATION, IF ANY WOUND INDICES OF OPERATION
WAS EXAMINED OR MEDICAL EXAMINER NOTIFIED (YES/NO)
21a TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED
21b 21c 21d
22a SIGNATURE
22b NAME AND ADDRESS OF CENTER
22c NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER) (IF OTHER THAN)

23a 23b 23c 23d
23a BIRTH OPERATION, REMOVAL (STOMACH) 23b BIRTH OPERATOR-NAME 23c LOCATION 23d CITY, TOWN, TWP, OR ROAD DISTRICT NO
24a BIRTHAL 24b Burr Oak Cemetery 24c Alsip, Illinois 24d 8-27-02

25a 25b 25c 25d
25a FUNERAL HOME 25b NAME 25c STREET AND NUMBER OR P.O. BOX 25d CITY, TOWN, TWP, OR ROAD DISTRICT NO
A. A. Rayner & Sons Funeral Home 318 East 71st Street Chicago, Ill

26a 26b 26c 26d
26a GENERAL DIRECTOR'S SIGNATURE 26b REGISTERAR 26c 26d
27a 27b 27c 27d
27a DATE FILED (LOCAL AND STANDARD) - DAY YEAR 27b 27c 27d
AUG 27 2002

28a 28b 28c 28d
28a 28b 28c 28d
28a 28b 28c 28d
28a 28b 28c 28d

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EXHIBIT "A"

LOT 8 (EXCEPT THE NORTH 70 FEET AND EXCEPT THE SOUTH 8 FEET TAKEN FOR ALLEY) IN BLOCK 10 IN PRESCOTT SUBDIVISION OF THE EAST 1/2 OF THE NORTH WEST 1/4 OF SECTION 27, TOWNSHIP 38 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL ID NUMBER: 20-27-121-015-0000

COMMONLY KNOWN AS: 7449 SOUTH INDIANA AVENUE
CHICAGO, IL 60619

Property of Cook County Clerk's Office