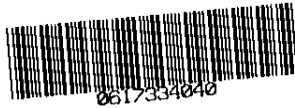


# UNOFFICIAL COPY

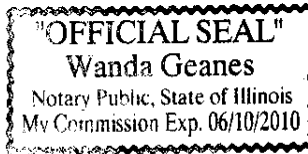


Doc#: 0617334040 Fee: \$30.50  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 08/22/2006 11:22 AM Pg: 1 of 4

## Property of Cook County Clerk's Office

### Notice of Heirship

Attached hereto are certified  
copies of death certificate of  
Ronnie Wanton and a court order  
that declared Evelyn Franklin  
as his sole heir at law.



Evelyn Franklin

SUBSCRIBED +  
Sworn to before  
me this 22  
day of 06, 2006  
Wanda Geanes  
Notary Public

Address of prop - 421 W. Long  
Chicago, IL.

PTIN: 16-09-123048-0000

1" Lot 6 in Lyman Bridges  
Addition to Chicago, Subdivision  
of the West 1/2 of the SE 1/4  
of the N.W. 1/4 of Sec. 9,  
Township 39 North, Range 13,  
East of the 3rd P.M. in  
Cook County, Illinois

MAIL TO:  
Evelyn Franklin  
5435 W. Race St  
Chicago, IL 60644



APRIL 17, 2006

STATE OF ILLINOIS  
County of Cook

# UNOFFICIAL COPY

DAVID ORR, County Clerk

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

NO.	REGISTRATION DISTRICT NO. <i>1024</i>	STATE OF ILLINOIS	STATE FILE NUMBER
	REGISTERED NUMBER <i>404</i>	<b>MEDICAL CERTIFICATE OF DEATH</b>	
1	DECEASED-NAME FIRST MIDDLE LAST <i>RONNIE WANTON</i>	SEX <i>Male</i>	DATE OF DEATH (MONTH, DAY, YEAR) <i>JUNE 23, 2002</i>
4	COUNTY OF DEATH <i>COOK</i>	AGE-LAST BIRTHDAY (YRS) MONTH DAYS <i>42</i>	DATE OF BIRTH (MONTH, DAY, YEAR) <i>SEPTEMBER 22, 1959</i>
	CITY, TOWN, TWP. OR ROAD DISTRICT NO. & NAME <i>6a. OAK PARK</i>	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) <i>6b. WEST SUBURBAN Hospital</i>	IF HOSP. OR INST. INDICATE D.O.A. OR EMER. RM. INPATIENT (SPECIFY) <i>6c. INPATIENT</i>
7	BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) <i>CHICAGO, IL</i>	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) <i>8a. NEVER MARRIED</i>	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) <i>8d. None</i>
10	SOCIAL SECURITY NUMBER <i>349-56-3752</i>	USUAL OCCUPATION <i>11a. LABORER</i>	KIND OF BUSINESS OR INDUSTRY <i>11b. GENERAL</i>
	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) <i>12. 10</i>	RESIDENCE (STREET AND NUMBER) <i>13a. 849 N. PINE</i>	CITY, TOWN, TWP. OR ROAD DISTRICT NO. <i>13b. CHICAGO</i>
	INSIDE CITY (YES/NO) <i>13c. YES</i>	COUNTY <i>13d. COOK</i>	STATE <i>13e. ILLINOIS</i>
	ZIP CODE <i>13f. 60651</i>	RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) <i>14a. BLACK</i>	OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.) <i>14b. NO</i>
15	FATHER-NAME FIRST MIDDLE LAST <i>N/A</i>	MOTHER-NAME FIRST MIDDLE LAST <i>15. EVELYN WANTON</i>	RELATIONSHIP <i>17b. MOTHER</i>
	INFORMANT'S NAME (TYPE OR PRINT) <i>17a. EVELYN FRANKLIN</i>	MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) <i>17c. 849 N. PINE CHICAGO, IL 60651</i>	
18	PART I. Enter the diseases, 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. <i>(a) Acute Renal Failure</i> <i>(b) Fulminant Hepatic Failure</i>		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
	PART II. Enter significant conditions contributing to death but not resulting in the underlying cause given in PART I. <i>Hepatic encephalopathy, Alcoholism</i>		AUTOPSY (YES/NO) <i>18a. NO</i>
	DATE OF OPERATION, IF ANY	MAJOR FINDINGS OF OPERATION	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? <i>20c. YES [ ] NO [ ]</i>
21	I (DID) (DID NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON <i>6/23/2002</i>	WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) <i>21b.</i>	HOUR OF DEATH <i>21c. 4:40 P.M.</i>
22	TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED. <i>22a. SIGNATURE [Signature]</i>		DATE SIGNED (MONTH, DAY, YEAR) <i>22b. 6/24/2002</i>
22c	NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) <i>JOHN KIRKLAUSMAN III Superior Street, Suite 403 Melrose Park IL 60160</i>		ILLINOIS LICENSE NUMBER <i>22d. 036-100938</i>
23	BURIAL, CREMATION, REMOVAL (SPECIFY) <i>24a. BURIAL</i>	CEMETERY OR CREMATORY-NAME <i>24b. OAKRIDGE</i>	LOCATION CITY OR TOWN STATE <i>24c. HILLSIDE, ILLINOIS</i>
25	FUNERAL HOME <i>25a. CORBIN COLONIAL FUNERAL CHAPEL 5345 W. MADISON CHICAGO, ILLINOIS 60644</i>		DATE (MONTH, DAY, YEAR) <i>24d. JUNE 29, 2002</i>
26	FUNERAL DIRECTOR'S SIGNATURE <i>26a. [Signature]</i>		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER <i>25c. 036-04794</i>
	LOCAL REGISTRAR'S SIGNATURE <i>26a. [Signature]</i>		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) <i>26b. JUNE 25, 2002</i>

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(Rev. 7/5/00) CCP 0305

4103 Order Declaring Heirship

## IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS COUNTY DEPARTMENT-PROBATE DIVISION

Estate of

RONNIE WANTON

Deceased

No. 06 P 3458

Docket \_\_\_\_\_

Page \_\_\_\_\_

### ORDER DECLARING HEIRSHIP

After considering evidence concerning heirship, the court declares that the following are the only heirs of the decedent:

EVELYN FRANKLIN, MOTHER

**ENTERED**  
JUDGE JAMES W. KENNEDY - 1557  
JUN 22 2006  
DOROTHY BROWN  
CLERK OF THE CIRCUIT COURT  
OF COOK COUNTY, IL  
DEPUTY CLERK

ENTER:

**COPY**  
**OK TO**  
**CERTIFY**

Judge's No. \_\_\_\_\_

Atty. No. 22918

Atty. Name: SANDIA ZITHEL

Firm Name: \_\_\_\_\_

Address: 432 N. Clark #305

City/Zip: CHICAGO 60610

Telephone: 7738905225

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Property of Cook County Clerk's Office

Y  
CLERK'S OFFICE

I hereby certify that the document to which this certification is affixed is a true copy.

Date June 22, 2006

Dorothy Brown  
Clerk of the Circuit Court  
of Cook County, IL

