



Doc#: 0706548054 Fee: \$30.50
Eugene "Gene" Moore RHSP Fee:\$10.00
Cook County Recorder of Deeds
Date: 03/06/2007 11:47 AM Pg: 1 of 4

AFFIDAVIT OF HEIRSHIP


VINEIA JOHNSON, being duly sworn on oath, states:

1. That she is the daughter of Emma Jean Johnson, decedent herein, is of legal age and resides in Chicago, Illinois.
2. That the decedent died on March 28, 2004, and at the time of her death was a resident of Chicago, Illinois. Attached is a copy of decedent's death certificate.
3. That decedent was the owner of the property located at 4315 W. Van Buren Street, Chicago, IL 60624 and legally described as follows: SEE LEGAL DESCRIPTION ATTACHED HERETO AND MADE A PART HEREOF.
4. That the decedent died intestate.
5. That decedent was married only once and then to Arthur Johnson, who predeceased the decedent. That of said marriage two children were born and none adopted, namely:
 - a. Vineia Johnson, a daughter, living, of legal age and competent;
 - b. Arthur Johnson, a son, living, of legal age and competent;
6. That decedent had one other child, namely, Linda K. Brown, a daughter, living, of legal age and competent, prior to her marriage to Arthur Johnson,
7. The decedent did not have or adopt any other children.

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8. Therefore, the living heirs of the decedent are as follows:

- a. Vineia Johnson, a daughter;
- b. Arthur Johnson, a son;
- c. Linda K. Brown, a daughter.

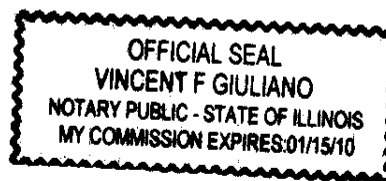


 Vineia Johnson

Subscribed and sworn to before me
 this 29th day of January, 2007



 Notary Public



This instrument was prepared by:
 Vincent F. Giuliano
 Attorney at Law
 7222 W. Cermak Road, Suite 300
 North Riverside, IL 60546

After recording mail to:
 Vincent F. Giuliano
 Attorney at Law
 7222 W. Cermak Road, Suite 300
 North Riverside, IL 60546

Property of Cook County Clerk's Office

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LEGAL DESCRIPTION

LOT 6 IN BLOCK 7 IN GUNDERSON & GAUGERS ADDITION TO CHICAGO A SUBDIVISION OF LOTS 1, 6 IN EACH OF BLOCKS 1 TO 4 AND LOTS 1, 2, 5, AND 6 IN EACH OF BLOCKS 5 TO 8 IN THE PARTITION OF THE WEST HALF OF THE WEST HALF OF THE NORTHEAST QUARTER AND THAT PART NORTH OF BARRY POINT ROAD OF THE WEST HALF OF THE WEST HALF OF THE SOUTHEAST QUARTER OF SECTION 15, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Address of Property:

Street: 4315 W. Van Buren Street

City, State: Chicago, Illinois 60624

PIN: 16-15-224-027

Property of Cook County Clerk's Office

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CITY OF CHICAGO
DEPARTMENT OF PUBLIC HEALTH

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

MAR 31 2004

I, JOHN L. WILHELM M.D., 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 IN 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.

THIS CERTIFICATE COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

REGISTERED NUMBER		604754	
DECEASED-NAME		FIRST MIDDLE LAST	
1. COUNTY OF DEATH		3. DATE OF DEATH (MONTH, DAY, YEAR)	
4. Cook		3. March 28, 2004	
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER		DATE OF BIRTH (MONTH, DAY, YEAR)	
6a. Chicago		5d. September 12, 1933	
BIRTH PLACE (CITY AND STATE OR FOREIGN COUNTRY)		SEX	
7. Sherill, Ark		2. Female	
SOCIAL SECURITY NUMBER		DATE OF BIRTH (MONTH, DAY, YEAR)	
10. 342 54 0877		5d. September 12, 1933	
RESIDENCE (STREET AND NUMBER)		IF HUSBAND OR INST. INDICATE D.O.A., CP, WEA, PM, INPATIENT (SPECIFY)	
13a. 4315 West VanBuren		6c. Inpatient	
STATE		NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)	
13e. Illinois		6b. Mayfield Manor Health Care	
FATHER-NAME FIRST MIDDLE LAST		KIND OF BUSINESS OR INDUSTRY	
15. James Shavies		8b. Widowed	
INFORMANT'S NAME (TYPE OR PRINT)		11a. Homemaker	
17a. Vineia Johnson		11b. Home	
18. PART I		CITY, TOWN, TWP. OR ROAD DISTRICT NO.	
Immediate Cause (Final disease or condition resulting in death)		Chicago	
(a) Coronary Artery Disease		RACE (WHITE, BLACK, AMERICAN INDIAN, BC, J) (SPECIFY)	
DUE TO, OR AS A CONSEQUENCE OF		14a. Black	
(b) DUE TO, OR AS A CONSEQUENCE OF		14b. NO YES NO YES	
(c) DUE TO, OR AS A CONSEQUENCE OF		MOTHER-NAME FIRST MIDDLE LAST	
PART II: Other significant conditions contributing to death but not resulting in the underlying cause given in PART I		16. Georgia Harris	
DATE OF OPERATION, IF ANY		RELATIONSHIP	
20a. 20b.		17b. Daughter	
(1) DID (2) DID NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON		MAILING ADDRESS (STREET AND NO OR P.O. CITY OR TOWN STATE ZIP)	
21a. 3-27-2004		17c. 4315 West VanBuren, Chicago, IL 60624	
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED		19a. No	
22a. SIGNATURE		19b. No	
NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)		MOTHER-NAME FIRST MIDDLE LAST	
22c. Satwant Kingra, MD 3830 W 95th St, Evergreen Park, IL.		19c. No	
NAME OF ATTENDING PHYSICIAN (OTHER THAN CERTIFIER) (TYPE OR PRINT)		MOTHER-NAME FIRST MIDDLE LAST	
23. John P. Infield		19d. No	
BURIAL, CREMATION, REMOVAL (SPECIFY)		MOTHER-NAME FIRST MIDDLE LAST	
24a. Burial		19e. No	
FUNERAL HOME		MOTHER-NAME FIRST MIDDLE LAST	
25a. Corbin Colonial Funeral Chapel 5345 West Madison Street Chicago Illinois 60644		MOTHER-NAME FIRST MIDDLE LAST	
FUNERAL DIRECTOR'S SIGNATURE		MOTHER-NAME FIRST MIDDLE LAST	
25b. John L. Wilhelm M.D.		MOTHER-NAME FIRST MIDDLE LAST	
LOCAL REGISTRAR'S SIGNATURE		MOTHER-NAME FIRST MIDDLE LAST	
26a. John L. Wilhelm M.D.		MOTHER-NAME FIRST MIDDLE LAST	
DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)		MOTHER-NAME FIRST MIDDLE LAST	
MAR 31 2004		MOTHER-NAME FIRST MIDDLE LAST	