

UNOFFICIAL COPY



Doc#: 0706505024 Fee: \$30.00
Eugene "Gene" Moore RHSP Fee:\$10.00
Cook County Recorder of Deeds
Date: 03/06/2007 09:46 AM Pg: 1 of 4

605 077

12-3

Affidavit of heirship

42

Legal description:

THE NORTH 1/2 OF LOT 2 IN BLOCK 5 IN RESUBDIVISION OF BLOCKS 1, 5 AND 12 AND LOTS I TO 1 IN BLOCK 13 IN FREDERICK H. BARTLETT'S 63RD STREET SUBDIVISION IN SECTION 15, TOWNSHIP 38 NORTH, RANGE 13, LYING EAST OF THE 3RD PRINCIPAL MERIDIAN, IN COOK COUNTY ILLINOIS.

Permanent Index Number: 19-15-311-020 (Volume number 393)

Property address: 6006 S. Kolmar, Chicago, IL 60629

STEWART TITLE OF ILLINOIS
2 N. LaSalle Street
Suite 525
Chicago, IL 60602
312-849-4243

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Stewart Title Company of Illinois AFFIDAVIT OF HEIRSHIP

STATE OF ILLINOIS)
) ss
COUNTY OF Cook)

ESTATE OF Patrick Connolly, Deceased.

And now on this 18th day of January, 2007, Arlene Connolly, after being first duly sworn under oath, testifies and deposes as follows, to wit:

1. My name is Arlene Connolly, I am over the age of twenty-one (21) years of age and, to my understanding, am otherwise competent to give testimony.

2. I reside at 16506 Nottingham Ct, Orland Park, IL 60467

3. I am the wife of Patrick (state relationship to deceased) and knew Connolly him/her in his her lifetime.

4. Arlene Connolly, owner of the property commonly known as 6006 S. Kolmar, Chicago, IL 60629, (see legal description attached) died on March 3, 1992 in the City of Chicago, County of Cook, State of Illinois.

5. The decedent was married one time(s), to Arlene Connolly.

6. 3 children were born to the decedent and Arlene Connolly, as follows, and are assumed to be of majority age, unless otherwise noted:

- Kevin Connolly _____
- Kathleen Sanner _____
- Keith Connolly _____

7. No persons were adopted by the decedent.

8. The parents of the decedent were Thomas Connolly and Bridgette Connolly, both said parents are now deceased.

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9. a) Pursuant to the Last Will and Testament of Patrick Connolly, the decedent herein, left his/her entire estate, both real and personal, to Arlene Connolly.

b) The decedent died intestate.

10. That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of 290,000.00 dollars.

11. The foregoing is based upon my own personal knowledge and belief, is true, and if called upon as a witness I would competently and consistently testify thereto.

FURTHER AFFIANT SAYETH NOT.



Arlene Connolly
AFFIANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS 18th DAY OF January 2007

Linda J Minnich
NOTARY PUBLIC

Prepared by and mail to:

Arlene Connolly
16506 Nottingham Ct.
Orland Park, IL 60467

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PIAK U 4 1992

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

I, VIRGINIA L. PARKER, M.P.A. ACTING 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 BY 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 PURSUANCE OF SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

STATE OF ILLINOIS
MEDICAL EXAMINER'S - CORONER'S
CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16-10
REGISTERED NUMBER MAR 29

DECEASED-NAME FIRST MIDDLE LAST
1. PATRICK F. CONNOLLY

COUNTY OF DEATH
4. COOK

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER
6a. CHICAGO

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)
7. CHICAGO, ILLINOIS

SOCIAL SECURITY NUMBER
11a. POLICEMAN

RESIDENCE (STREET AND NUMBER)
13a. 4553 W. 64TH STREET

STATE
13b. ILLINOIS

FATHER-NAME FIRST MIDDLE LAST
15. THOMAS CONNOLLY

INFORMANT'S NAME (TYPE OR PRINT)
17a. ARLENE M. CONNOLLY

RELATIONSHIP
17b. WIFE

MAILING ADDRESS (STREET AND NO., OR R.F.D., CITY, TOWN, STATE, ZIP)
17c. 4553 W. 64TH ST. CHICAGO, ILLINOIS 60629

Immediate Cause (Final disease or condition resulting in death)
(a) APTERIO S - CEREBRAL - ARTERIOVASCULAR DISEASE

CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (b) DUE TO, OR AS A CONSEQUENCE OF

STATEMENT OF UNDERLYING CAUSE LAST
(c) 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.

NATURAL, ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED (SPECIFY)
20a. NATURAL

PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BUILDING, ETC.) (SPECIFY)
20b. HOME

DATE OF INJURY (MONTH, DAY, YEAR)
20c. 3 - 3 - 92

LOCATION (CITY, VIL OR TWP., OR TWP., OR RD. DIST. NO., COUNTY, STATE)
20d. CHICAGO, ILLINOIS

IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?
20e. YES NO

I CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INQUIRY, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT
21a. CORONER'S - MEDICAL EXAMINER'S SIGNATURE
21b. EVELYN M. D.

CORONER'S PHYSICIAN'S SIGNATURE
22a. [Signature]

HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I OR PART II, ITEM 18)
20f. AT

IF AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH (YES/NO)
19a. YES NO

DATE SIGNED (MONTH, DAY, YEAR)
22b. 3 - 3 - 92

DATE SIGNED (MONTH, DAY, YEAR)
23b. 3 - 3 - 92

CEMETERY OR CREMATORY - NAME
24b. RESURRECTION

LOCATION CITY OR TOWN STATE
24c. JUSTICE, ILLINOIS

FUNERAL HOME
25a. JOHN J. MINICH

NAME STREET AND NUMBER OR R.F.D.
5749 S. ARCHER AVENUE, CHICAGO, ILLINOIS 60638

FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER
25c. 034-01151

FUNERAL DIRECTOR'S SIGNATURE
25b. [Signature]

LOCAL REGISTRAR'S SIGNATURE
26a. [Signature]

DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
26b. MAR 04 1992

DATE OF BIRTH (MONTH, DAY, YEAR)
5d. MAY 10 1941

DATE OF DEATH (MONTH, DAY, YEAR)
3. 3 - 3 - 92

IF HOSP. OR INST. INDICATED O.A., OPENER, RM, INPATIENT (SPECIFY)
6c. DOA

WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)
9. YES

EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)
12. College (1-4 or 5-1)

INSIDE CITY (YES/NO)
12. YES

CITY, TOWN, OR ROAD DISTRICT NO.
13b. CHICAGO

OF HISPANIC ORIGIN? (SPECIFY NO OR YES - IF YES, SPECIFY CUBAN, MEXICAN, PORTO RICAN, ETC.)
13c. YES

MOTHER-NAME FIRST MIDDLE LAST
14b. BRIDGET FOLEY

APPROXIMATE MILEAGE AND DIRECTION BETWEEN HOME AND DEATH