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5/10/21 6/8
STATE OF ILLINOIS)
)
COUNTY OF COOK)



Doc#: 0708605178 Fee: \$54.00
Eugene "Gene" Moore RHSP Fee:\$10.00
Cook County Recorder of Deeds
Date: 03/27/2007 03:34 PM Pg: 1 of 4

AFFIDAVIT OF HEIRSHIP For ROSENA HARRIS

I, the Affiant, on oath, state:

1. My name and residence is
THELMA H. JOHNSON
2548 Terrytown
Henderson, Nevada 89052
2. The decedent's name is Rosena Harris.
3. The date of the decedent's death was August 18, 1985; and, I have attached a copy of the death certificate to this affidavit as attachment A.
4. The decedent's place of residence immediately before her death was 6626 South Langley, Chicago, IL. At the time of her death, Rosena Harris had an interest in the property located at 3319 East 91st Street, in the city of Chicago, IL.
5. No letters of office are now outstanding on the decedent's estate and no petition for letters is contemplated or pending in Illinois or in any other jurisdiction, to my knowledge.
6. The gross value of the decedent's entire personal estate, including the value of all property passing to any party either by intestacy or under a will did not exceed \$75,000.00. There are no federal or state inheritance taxes owed.
7. All of the decedent's funeral expenses have been paid.
8. There is no known claimant or contested claim against the decedent.
9. The decedent was married to Monroe Harris, who pre-deceased her on February 19, 1978. Decedent never remarried. There were three children born of the marriage between decedent and Monroe Harris, who survived decedent at the time of her death: Affiant Thelma H. Johnson (daughter); Evelyn Threadgill (daughter) of 2271 Potter Lake, Henderson, Nevada 89052 and Donald Harris (son) of 9417 South Green, Chicago, IL 60620.
10. There are no minor children nor are there any adult dependent children of the decedent.

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- 11. The decedent did not leave a will.
- 12. Affiant is unaware of any dispute or potential conflict as to the heirship of the decedent.
- 13. The foregoing statement is made under the penalties of perjury.

Thelma H. Johnson

 THELMA H. JOHNSON
 Affiant

Subscribed and sworn to before me on
 This 6th day of January, 2007



Taryn Springs

 NOTARY PUBLIC

mail to:

Taryn Springs P.C.
 9510 S. Constance #2
 Chicago IL 60617

Property of Cook County Clerks Office

DECEMBER 15, 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.


 COUNTY CLERK

BIRTH NO.		REGISTRATION DISTRICT NO. 1632		STATE OF ILLINOIS		STATE FILE NUMBER		
REGISTERED NUMBER: 405		MEDICAL CERTIFICATE OF DEATH 85042856						
DECEASED—NAME		FIRST	MIDDLE	LAST	SEX	DATE OF DEATH (MONTH, DAY, YEAR)		
1. ROSENA		HARRIS			2. FEMALE	3. AUGUST 18, 1985		
RACE—(WHITE, BLACK, AMERICAN INDIAN, ETC.) (SPECIFY)		AGE—LAST BIRTHDAY (YRS)	UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (MO., DAY, YEAR)		COUNTY OF DEATH	
4a. BLACK		5a. 86	5b.	5c.	6. FEBRUARY 13, 1899		7b. COOK	
CITY, TOWN, TWP. OR ROAD DISTRICT, NUMBER		HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)				IF HOSP. OR INST. INDICATED DOA OF EMER. RM. INPATIENT (SPECIFY)		
7a. CHICAGO HEIGHTS		7c. ST. JAMES HOSPITAL MEDICAL CENTER				7d. INPATIENT		
STATE OF BIRTH (IF NOT IN U.S.A. NAME COUNTRY)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)		
8. MISSISSIPPI		9. U.S.A.		10. WIDOWED		11. None		
SOCIAL SECURITY NUMBER		USUAL OCCUPATION		KIND OF BUSINESS OR INDUSTRY		WAS DECEASED EVER IN U.S. ARMED FORCES (SPECIFY YES OR NO)		
12. 346-07-91030		13a. HOME MAKER		13b. AT HOME		13c. NO		
RESIDENCE STREET AND NUMBER		CITY, TOWN, TWP. OR ROAD DISTRICT NO.		INSIDE CITY (YES/NO)		COUNTY STATE		
14a. 6626 SOUTH LANGLEY		14b. CHICAGO		14c. YES		14d. COOK ILLINOIS		
FATHER—NAME		FIRST	MIDDLE	LAST	MOTHER—MAIDEN NAME		FIRST MIDDLE LAST	
15. CHARLES		STIMLEY			ELIZABETH		PARKER	
INFORMANT NAME (TYPE OR PRINT)				RELATIONSHIP MAILING ADDRESS (STREET AND NO. OR R. F. D., CITY OR TOWN, STATE, ZIP)				
17a. ROSEMARIE GROVE				17b. MEDICAL RECORDS 1423 CHICAGO ROAD CHICAGO HEIGHTS, ILLINOIS 60411				
18. DEATH WAS CAUSED BY:		[ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)]					APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
PART I. IMMEDIATE CAUSE		1a. RESPIRATORY FAILURE						
CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.		1b. ASPIRATION PNEUMONIA						
		1c. REGURGITATION AND DECREASED REFLEXES						
PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)		19a. CONVULSIVE DISORDER - CARDIAC ARRHYTHMIA					19b. YES, WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH? NO	
DATE OF OPERATION, IF ANY		MAJOR FINDINGS OF OPERATION				IF FEMALE, WAS THERE A PREGNANCY IN LAST THREE MONTHS?		
20a.		20b.				20c. YES NO		
1. (a) DID YOU NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON		(MONTH, DAY, YEAR)		WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (SPECIFY YES OR NO, N/A)		HOUR OF DEATH		
21a. 8-17-85				21b. NO		21c. 5:35A. M.		
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.						DATE SIGNED (MO., DAY, YR.)		
22a. SIGNATURE		(TYPE OR PRINT)				ILLINOIS LICENSE NUMBER		
22a. H.A. VELASCO, MD		333 DIXIE HWY. CHICAGO ILL 60641				22b. 36-39414		
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)						NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED		
23. BURIAL, CREMATION, REMOVAL (SPECIFY)		CEMETERY OR CREMATORY—NAME		LOCATION		DATE (MONTH, DAY, YEAR)		
24a. BURIAL		24b. BURR OAK		24c. WORTH TOWNSHIP ILL		24d. 8-22-85		
FUNERAL HOME		NAME		STREET AND NUMBER OR R. F. D.		CITY OR TOWN STATE ZIP		
25a. HALSTED MEMORIAL		25b. 2035 E. 79TH CHICAGO		ILL		60649		
FUNERAL DIRECTOR'S SIGNATURE						FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER		
25b. [Signature]						25c. 7057		
LOCAL REGISTRAR'S SIGNATURE						DATE REC'D BY LOCAL REGISTRAR (MONTH, DAY, YEAR)		
26a. John M. Costabile (cf)						26b. Aug. 19, 1985		

VR 200 REV. 5/82

Illinois Department of Public Health - Office of Vital Records

BASED ON 1978 U.S. STANDARD CERTIFICATE)

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STEWART TITLE

ALTA COMMITMENT
Schedule B - Exceptions Cont.
File Number: TM230636
Assoc. File No: 510211

GUARANTY COMPANY
HEREIN CALLED THE COMPANY

COMMITMENT - LEGAL DESCRIPTION

LOT 5 IN BLOCK 65 IN THE SUBDIVISION MADE BY CALUMET AND CHICAGO CANAL AND DOCK COMPANY OF PARTS OF SECTIONS 5 AND 6, TOWNSHIP 39 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED JANUARY 17, 1874, IN BOOK 7 OF PLATS, PAGE 7, IN COOK COUNTY, ILLINOIS.

26-05-113-007-0000

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