Doc#: 1231947051 Fee: \$42.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds
Date: 11/14/2012 09:18 AM Pg: 1 of 3

Accorn 192

AFFIDAVIT OF HEIRSHIP

FRANK JOHNSON, (A ffiant) being duly sworn upon oath, deposes and states:

- 1. That the Affiant reside: at: 8822 S. Wallace, Chicago, IL 60620.
- 2. That the Affiant is the stepson of OSCAR J. WASHINGTON, deceased.
- 3. That the Decedent died on 02/01/2)12 in the County of Cook in the State of Illinois. (Death Certificate attached as Exaility A.)
- 4. That the Decedent died owning an interest in the property legally described as follows:

The South 7 feet of lot 9 and all of Lot 10 in Walden's Subdivision of Lots 1 to 10 inclusive in Block 12 in Sisson and Newman's Subdivision of the Northwest 1/4 of Section 4, Township 37 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

Commonly known as: 8822 S. WALLACE, CHICAGO, IL 60620. PIN: 25-04-111-044-0000

- 5. That the Decedent died leaving a will.
- 6. That the Decedent was married to the following individual(s), and no others.

Name Ada E. Washington

Status
Pre-deceased 11/28/2002

7. That the following children were born to, or adopted by the Decedent and no others.

Name Status Age

FRANK JOHNSON Single 79

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UNOFFICIAL COPY

- 8. That to the best information and belief of the Affiant, no children were born to the Decedent out of wedlock, except as follows: NONE.
- 9. That in the event the Decedent died without wife or child surviving, to the Affiants best information and belief, the following represents the Decedent's heirship: Noted above.
- 10. That the total value of the estate of the Decedent including the taxable interest in the aforesaid property is \$75,000.00.
- 11. That no claims have been filed against a Decedent and that all expenses of illness and or functed expenses have been paid in full.
- 12. That the Federal Estate Tax does not apply. That the Illinois Estate Tax does not apply. That no (Federal Estate Tax / Illinois Estate Tax) is due.

FURTHER AFFIANT SAYETH NOT.

All riders and pages attached are ir tended to be incorporated in and to be a part of the Affidavit for the purposes stated.

Affiant

OFFICIAL SEAL
PATRICIA A. TOWNS
Liotary Public - State of Illinois
My Commission Expires Oct 24, 2014

Subscribed and sworn to before me this

Notary Public

Prepared by:

Patricia A. Towns Attorney at Law 800 E. 78th Street Chicago, IL 60619 Mail to:

Frank Johnson 8822 S. Wallace Chicago, IL 60620

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COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS

MEDICAL EXAMINER/CORONER CERTIFICATE OF DEATH

| STATE FILE NUMBER 2012.000 | 8387 MEC | DICAL EXAMINER'S CASE I | NUMBER 008 FEB 12 | DAIL | SSUED 02/10/2012 |
|---|------------------------------|---|--|--|--|
| DECEDENTS LEGAL NAME OSCAR WASHINGTON | | | SEX MAI | 선수는 물건이 무섭하는 생각이 있다. | 1, 2012 |
| COUNTY OF DEATH COOK | | AST BIRTHDAY EARS | DATE OF BIRTH FEBRUARY | 04, 1923 | |
| CITY OR TOWN CHICAGO | | | ROTHER INSTITUTION NAME NALLACE ST | | |
| PLACE OF DEATH DECEDENTS HOME | | | | | |
| BIRTHPLACE NEW ORLEANS, LA | SOCIAL SECURITY NUMBER | STATUS AT TIME OF DEATH WIDOWED | SURVIVING SPOUSE/CIVIL | | EVER IN U.S. ARMED: FORÇES? YES |
| RESIDENCE 8822 S WALLACE S | | APT, NO. | CITY OR TOWN CHICAGO | IN IN | SIDE CITY LIMITS? YES |
| COUNTY STATE | | PARENT'S NAME PRIOR TO FIRST A AVAILABLE | | RVÇO-PARENT'S NAME PRIOR TO FIRS T AVAILABLE | T MARRIAGE/CIVIL UNIÓN |
| INFORMANT'S NAME FRANK JOHNSON | | ATIONSHIP STEP-SON | MAILING ADDRESS 8822 S WALLAC | E, CHICAGO, IL, 60620 | |
| METHOD OF DISPOSITION CREMATION | FLAC'L OF DISPO HEIGHTS C | SITION REMATORY | LOCATION CITY OR T CHICAGO HEIGH | | isposition ARY 07, 2012 |
| FUNERAL HOME BARKERS MÖRTUARY, 9900 S. THROOP, CHUCALOC IL, 60643 | | | | | |
| FUNERAL DIRECTOR'S NAME HERBERT C BARKER | | | 03 | RAL DIRECTOR'S ILLINOIS LICEI 4009009 | |
| LOCAL REGISTRAR'S NAME DAVID ORR | | | | FILED WITH LOCAL REGISTRAF BRUARY 3, 2012 | |
| CAUSE OF DEATH PART I: ARTERIOSCLEROTIC CARDIOVASCUE / DISEASE | | | | | |
| (Final disease or condition resulting in death) b. | | Due to (or as a co. secuen | Se of): | OXIMA NI BETA | |
| | | Due to (of as a consequent | á mí | APFF NTERW | |
| | | | | | |
| | | Dué to (or as a consequen | | | - 10 |
| PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART. WAS AN AUTOPSY PERFORMED? NO WERE AUTOPSY FINDINGS USED TO | | | | | |
| FEMALE PREGNANCY STATUS | | | | COMPLETE CAUSE OF DE | |
| NOT APPLICABLE DATE OF INJURY | TIME OF IN | JURY PLACE OF IN | JURY | NATURAL | INJURY AT WORK? |
| | | | 경기 경기 - 기계 | | |
| LOCATION OF INJURY | | | | | |
| DESCRIBE HOW INJURY OCCURRED: IF TRANSPOLATION INJURY SPECIFY. | | | | | |
| ATTEND THE DECEASED? DA | TE LAST SEEN ALIVE | WAS MEDICAL EXAMINER OF CORONER CONTACTED? | | INCED RY 01; 2012 | TIME OF DEATH 07:00 AM |
| CERTIFIER MEDICAL EXAMINER/CORONER DATE CERTIFIED FEBRUARY 02, 2012 | | | | | |
| NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH NANCY L JONES MD, 2121 W HARRISON ST, CHICAGO, IL, 60612 | | | | | |
| | | | | The first of the f | The first of the f |

This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health

> David Orr Cook County Clerk



