

16 PST 208003PK

**UNOFFICIAL COPY**

**Property: 1095 East Villa Drive  
Des Plaines, IL 60016**

**PIN#: 09-20-113-011-0000**

**Chicago Title Insurance Company  
File #: 16PST208003PK**

Doc#: 1632622082 Fee: \$54.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 11/21/2016 10:27 AM Pg: 1 of 4

**AFFIDAVIT OF HEIRSHIP**

Now comes, **MARY GENEVA PARADY**, who resides at **18706 Terrapin Drive, Cypress, TX 77433**, and **KENNETH FRANK LINDGREN, JR.**, who resides at **710 E. Algonquin, Des Plaines, IL 60016**, the being first duly sworn on oath, depose and say as follows:

1. **MARY GENEVA PARADY** is the daughter of, and **KENNETH FRANK LINDGREN, JR.**, is the son of the Decedent, **DIANE ELAINE LINDGREN**, and are fully familiar with her family history. The title to the subject parcel of real estate was vested in **DIANE LINDGREN**, divorced and not since remarried, per a Warranty Deed dated **October 13th, 1997** and recorded **October 22, 1997** in the office of the Cook County Recorder of Deeds as document number **97785226**.
2. **DIANE ELAINE LINDGREN** was married once to **KENNETH FRANK LINDGREN**. She was never ever married to any other person. This marriage was the only marriage for either one. **DIANE ELAINE LINDGREN** divorced from **KENNETH FRANK LINDGREN** on **August 28, 1986**.
3. **DIANE ELAINE LINDGREN** never remarried.
4. **DIANE ELAINE LINDGREN** died **TESTATE** on **August 26, 2016**; attached hereto as **EXHIBIT "A"** is a copy of the Death Certificate for **DIANE ELAINE LINDGREN**; attached hereto as **EXHIBIT "B"** is a copy of the **LAST WILL AND TESTAMENT OF DIANE ELAINE LINDGREN**.
5. **DIANE ELAINE LINDGREN** never remarried.

# UNOFFICIAL COPY

**Affidavit of Heirship**  
**Page 2 of 3**

6. At the time of the death of **DIANE ELAINE LINDGREN**, there were two (2) surviving children of **DIANE ELAINE LINDGREN**. There were no other children who predeceased **DIANE ELAINE LINDGREN** and there were no children adopted by **DIANE ELAINE LINDGREN**.
7. At the time of the death of **DIANE ELAINE LINDGREN**, both children of **DIANE ELAINE LINDGREN** were then living.
8. Upon the death of **DIANE ELAINE LINDGREN**, a one-half (1/2) undivided interest in the subject parcel of real passed to each of the surviving children of **DIANE ELAINE LINDGREN** to wit:
  - (a) **MARY GENEVA PARADY**, a surviving daughter of **DIANE ELAINE LINDGREN**, as to an undivided one-half (1/2) interest in the subject parcel of real estate.
  - (b) **KENNETH FRANK LINDGREN, JR.**, a surviving son of **DIANE ELAINE LINDGREN**, as to an undivided one-half (1/2) interest in the subject parcel of real estate.
9. That all heirs of the Decedents are of legal age, competent and under no legal infirmity.
10. That all heirs of the Decedents having any interest in the subject parcel of real estate will execute the deed of conveyance.

**THIS SPACE INTENTIONALLY LEFT BLANK**

# UNOFFICIAL COPY

**Affidavit of Heirship**

Page 3 of 3

That this affidavit is made to induce Chicago Title Insurance Company to issue a policy of title insurance to the prospective bona fide purchaser of the subject parcel real estate located at 1095 East Villa Drive, Des Plaines, IL 60016 with a property index number 09-20-113-011-0000.

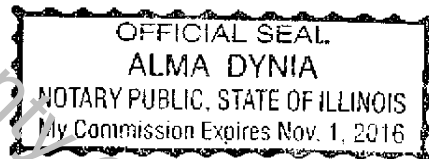
**FURTHER THIS AFFIANT SAYETH NOT**

DATED THIS 24<sup>th</sup> DAY OF OCTOBER, 2016.

Mary Geneva Parady  
MARY GENEVA PARADY  
Kenneth Frank Lindgren, Jr., by  
STJG, his att  
KENNETH FRANK LINDGREN, JR.

Subscribed and Sworn to before me

This 24 day of OCTOBER, 2016



[Signature]  
Notary Public

**REVIEWED AND APPROVED BY:**

Mary Geneva Parady DATE: 10-24-16  
MARY GENEVA PARADY

Kenneth F. Lindgren Jr DATE: 10-24-16  
KENNETH FRANK LINDGREN, JR.

**This Document Prepared By:**

Name: Stanley Joseph Czaja, Attorney at Law  
Address: 7521 North Milwaukee Avenue  
City: Niles, Illinois 60714  
Phone: (847) 647-2088

**UNOFFICIAL COPY**

## COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

## MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2016 0067274

DATE ISSUED 9/2/2016

DECEDENT'S LEGAL NAME DIANE E LINDGREN		SEX FEMALE	DATE OF DEATH AUGUST 26, 2016	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 73 YEARS	DATE OF BIRTH MAY 09, 1943		
CITY OR TOWN DES PLAINES		HOSPITAL OR OTHER INSTITUTION NAME 1095 E VILLA		
PLACE OF DEATH DECEDENT'S HOME				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]-4243	STATUS AT TIME OF DEATH DIVORCED FROM MARRIAGE	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1095 E VILLA	APT. NO.	CITY OR TOWN DES PLAINES	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60016	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION JOHN LAZAR	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION MARY GILL
INFORMANT'S NAME MARY G PARADY		RELATIONSHIP DAUGHTER	MAILING ADDRESS 18706 TERRAPIN DRIVE, CYPRESS, TX, 77433	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION AGACIA PARK CEMETERY	LOCATION - CITY OR TOWN AND STATE CHICAGO, IL	DATE OF DISPOSITION AUGUST 30, 2016	
FUNERAL HOME NELSON FUNERAL HOME, 820 TALCOTT ROAD, PARK RIDGE, IL, 60068				
FUNERAL DIRECTOR'S NAME STEPHANIE M BROWN			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015686	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR AUGUST 30, 2016	
CAUSE OF DEATH PART I. CARDIORESPIRATORY ARREST				
IMMEDIATE CAUSE (Final disease or condition resulting in death)				
a. _____ Due to (or as a consequence of):				
b. CORONARY ARTERY DISEASE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE				
c. PERIPHERAL VASCULAR DISEASE, FORMER SMOKER				
Due to (or as a consequence of):				
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.			WAS AN AUTOPSY PERFORMED? NO	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
FEMALE PREGNANCY STATUS NOT PREGNANT WITHIN LAST YEAR			MANNER OF DEATH NATURAL	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?	
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRED:			IF TRANSPORTATION INJURY, SPECIFY:	
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE AUGUST 24, 2016	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 08:26 AM
CERTIFIER PHYSICIAN			DATE CERTIFIED AUGUST 29, 2016	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH BENEDICT E GISZEK MD, 431 LAKEVIEW COURT, MT PROSPECT, ILLINOIS, 60056			PHYSICIAN'S LICENSE NUMBER 036-117812	



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*  
David Orr  
Cook County Clerk

