



1709315094

Doc# 1709315094 Fee \$40.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 04/03/2017 01:37 PM PG: 1 OF 2

SPECIAL NOTICE:

This form is **NOT** required by law, nor the Cook County Recorder of Deeds (CCRD). CCRD employees **CANNOT** assist with the preparation of this, or **ANY LEGAL FORM.**

PREPARED BY:

Blank lines for signature and name.

SURVIVING TENANT AFFIDAVIT

I, WILLIE SHEDD the surviving tenant of the tenancy created by the deed with the document number: 072941056 do hereby declare under oath that the tenant MARY JAMES SHEDD died on 01/06/2017 as evidenced by the attached certified copy of her/his death certificate (see attached).

I also declare that the aforementioned tenant was an owner of property with the following details:

LEGAL DESCRIPTION

The South Half of Lot 2 and the North 18 feet 9 inches of Lot 3 in Block 1 in the Subdivision of Lot 4 in the

Subdivision of Lot 3 in the Assessor's Subdivision of the West Half of the Northwest Quarter of Section 22,

Township 37 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois

PROPERTY IDENTIFICATION NUMBER (PIN)

2 5 - 2 2 - 1 1 3 - 0 5 4 0 0 0 0

COMMONLY KNOWN ADDRESS:

11402 S. INDIANA AVENUE

CHICAGO, ILLINOIS 60628

NOTARY & AFFIANT SIGNATURE SECTION BELOW

Subscribed & Sworn to me by:

Willie Shedd

Affiant Signature:

Edmund Scott

On the Following Date:

APRIL 3, 2017



UNOFFICIAL COPY

**COOK COUNTY CLERK VITAL RECORDS
CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2017.0003501

DATE ISSUED 4/3/2017

DECEDENT'S LEGAL NAME MARY JAMES SHEDD		SEX FEMALE	DATE OF DEATH JANUARY 06, 2017	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 78 YEARS	DATE OF BIRTH MARCH 05, 1938		
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME ROSELAND COMMUNITY HOSPITAL		
PLACE OF DEATH EMERGENCY ROOM / OUTPATIENT				
BIRTHPLACE KOSCIUSKO MS	SOCIAL SECURITY NUMBER UNKNOWN	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME WILLIE SHEDD SR	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 11402 S INDIANA AVE	APT. NO.	CITY OR TOWN CHICAGO		INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60628	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION EMZIE LATIKER SR	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION RUTH ROBIE
INFORMANT'S NAME WILLIE SHEDD SR		RELATIONSHIP SPOUSE	MAILING ADDRESS 11402 S INDIANA AVE, CHICAGO, IL 60628	
METHOD OF DISPOSITION CREMATION	PLACE OF DISPOSITION HEIGHTS CREMATORY	LOCATION - CITY OR TOWN AND STATE CHICAGO HEIGHTS, IL	DATE OF DISPOSITION	
FUNERAL HOME GATLING'S CHAPEL INC, 10133 S HALSTED ST, CHICAGO, IL 60628				
FUNERAL DIRECTOR'S NAME WILHELMINA M CUNNINGHAM			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015252	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR JANUARY 17, 2017	
CAUSE OF DEATH PART I: CARDIOPULMONARY ARREST				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		b.	Due to (or as a consequence of)	
		c.	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 APPLICABLE			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 DECEMBER 27, 2016	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 09:22 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JANUARY 12, 2017	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR JAI ARYA, 45 W 111TH STREET, CHICAGO, ILLINOIS, 60628				PHYSICIAN'S LICENSE NUMBER 036051910

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM



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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE