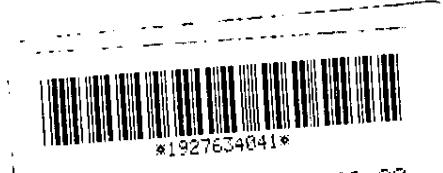


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Doc# 1927634041 Fee \$88.00

IRHSP FEE: \$9.00 RPRF FEE: \$1.00

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 10/03/2019 10:16 AM PG: 1 OF 4

Property of Cook County Clerk's Office

[Space Above Is For Recording Data]

Affidavit of Heirship A19-2205 (RS)

[Space Below Is Intentionally Left Blank]

PREPARED BY:

Law office of Frank Panzica
5523 W Cumberland Ave Ste 1211
Chicago, IL 60656

RETURN TO:

Law office of Frank Panzica
5523 W Cumberland Ave Ste 1211
Chicago, IL 60656

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A19-220528

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AFFIDAVIT OF HEIRSHIP

AFFIDAVIT OF HEIRSHIP

The undersigned, having been duly sworn, hereby swears that following statements are true and correct to the best of her knowledge and belief:

1. I am the widow of Frank Anderson, who passed away on September 1, 2009. A true and correct copy of Frank Anderson's death certificate is attached hereto as Exhibit A.
2. Frank Anderson was married twice during his lifetime. His first marriage was to Berenice Anderson, which ended in divorce. One (1) child was born of the marriage between Berenice Anderson and Frank Anderson, namely Frank L. Anderson, who is over 18 years of age and mentally competent.
3. Frank Anderson's second marriage was to the affiant, Rosie Anderson, who survived her husband and is over 18 years of age and mentally competent. One (1) child was born of the marriage between Frank Anderson and Rosie Anderson, namely Francine Jessica Anderson, who is over 18 years of age and mentally competent.
4. Frank Anderson neither had nor adopted any other children during his lifetime.

WHEREFORE, the decedent, Frank Anderson, left as his only heirs at law his wife, Rosie Anderson, his son, Frank L. Anderson, and his daughter, Francine Jessica Anderson.

DATED this 20 day of Aug., 2019

Rosie Anderson
Rosie Anderson

State of Illinois, County of COOK ss. I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT **Rosie Anderson**, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that she signed, sealed and delivered the same instrument as her free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and official seal, this 20th day of Aug, 2019.

Commission expires 8-23 202021

Rochelle Closure-Stanford
Notary Public

This instrument was prepared by: Mitch Mancione, Law Office of Frank Panzica, 5523 N. Cumberland, Ste. 1207, Chicago IL.
(NAME AND ADDRESS)

SEND SUBSEQUENT TAX BILL TO:



MAIL TO:
Law Office of Frank Panzica
5523 N. Cumberland, Ste. 1207
Chicago, IL 60656

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Legal Description

THE NORTH 25 FEET OF LOT 1 IN BLOCK 3 IN JOHNSTON'S SUBDIVISION OF LOT 27 IN SCHOOL TRUSTEES' SUBDIVISION OF SECTION 16, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property Address:
5538 S Princeton Ave
Chicago, IL 60621

Pin: 20-16-201-053-0000

Property of Cook County Clerk's Office

COOK COUNTY
RECORDER OF DEEDS

COOK COUNTY
RECORDER OF DEEDS

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CERTIFICATION OF DEATH RECORD

COOK COUNTY CLERK VITAL RECORDS

CHICAGO, ILLINOIS

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2009 0080331

DATE ISSUED 10/1/2019

DECEDENT'S LEGAL NAME FRANK ANDERSON			SEX MALE	DATE OF DEATH SEPTEMBER 01, 2009	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 74 YEARS		DATE OF BIRTH MAY 25, 1935	
CITY OR TOWN CHICAGO			HOSPITAL OR OTHER INSTITUTION NAME UNIVERSITY OF ILLINOIS HOSPITAL		
PLACE OF DEATH INPATIENT					
BIRTHPLACE GREENWOOD, MS		SOCIAL SECURITY NUMBER ██████████		STATUS AT TIME OF DEATH MARRIED	
			SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME: ROSIE JACKSON		EVER IN U.S. ARMED FORCES? NO
RESIDENCE 5522 SOUTH PRINCETON			APT. NO. 1ST FLOOR	CITY OR TOWN CHICAGO	
INSIDE CITY LIMITS? YES					
COUNTY COOK	STATE IL	ZIP CODE 60621	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION TALMITCH ANDERSON		MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION VIRGINIA SAMUELS
INFORMANT'S NAME SHIELA HOLLOWEL		RELATIONSHIP HOSPITAL RECORDS		MAILING ADDRESS 1740 WEST TAYLOR, CHICAGO, IL 60612	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION HEIGHTS CREMATORY		LOCATION - CITY OR TOWN AND STATE CHICAGO HEIGHTS, IL	DATE OF DISPOSITION SEPTEMBER 15, 2009
FUNERAL HOME SEALS FUNERAL HOME, 8354 S MARQUETTE, CHICAGO, IL, 60617					
FUNERAL DIRECTOR'S NAME MORROW, BRUCE				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014634	
LOCAL REGISTRAR'S NAME DAVID ORR				DATE FILED WITH LOCAL REGISTRAR NOVEMBER 5, 2009	
CAUSE OF DEATH PART I: HYPOXIC RESPIRATORY FAILURE					
IMMEDIATE CAUSE <small>(Final disease or condition resulting in death)</small>		a.		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		Due to (or as a consequence of):			
		b. ASPIRATION PNEUMONIA			
		Due to (or as a consequence of):			
		c. METASTATIC EXOCRINE TUMOR OF THE PANCREAS			
		Due to (or as a consequence of):			
PART II. Enter other <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I.				WAS AN AUTOPSY PERFORMED? YES	
				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? NO	
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 SEPTEMBER 01, 2009	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO		DATE PRONOUNCED	TIME OF DEATH 11:40 AM
CERTIFIER PHYSICIAN				DATE CERTIFIED NOVEMBER 05, 2009	
NAME ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH BROWN MD, AMBER, 1740 WEST TAYLOR, CHICAGO, ILLINOIS, 60612					PHYSICIAN'S LICENSE NUMBER 125056280

1099486



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.

Karen A. Yarbrough

Karen A. Yarbrough
Cook County Clerk

