AFFIDAY LINOFFICIAL

HEIRSHIP

Mail Deed To: & pre faved by

Mario Correa, Esq.

6200 N. Hiawatha Ave., Ste 625

Chicago, IL 60646

Taxpayer:

DARRYL JOHNSON 4020 W. Carroll Chicago, IL 60624



Doc# 2212315028 Fee \$88.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 05/03/2022 01:32 PM PG: 1 OF 3

I, DARRYL JOHNSON, being first duly sworn, on oath state that:

- 1. I am 53 years old and I have been a resident of the City of Chicago, County of Cook, State of Illinois, for 40 years.
- 2. On May 1, 2017, FTTA B. JOHNSON, died as evidenced by the death certificate attached as Exhibit A.
- 3. I personally know that ETTA B. JOHNSON, decedent, died intestate on May 1, 2017, a single woman and left surviving her three children RAMAL JOHNSON, CYNTHIA JOHNSON, and DARRYL A. JOHNSON and that decedent left no other surviving child or other descendants of a deceased child, and never adopted a child.
- 4. I was well acquainted with ETTA B. JOHNSGN, who in her lifetime was the owner of the following real estate:

LEGAL DESCRIPTION ATTACHED

PIN: 16-10-403-031-0000

Address: 4020 W. Carroll Ave., Chicago, Illucis

5. Under Illinois law, *Eckland v. Jankoski*, 707 Ill. 263 (IL SCt, 1950), absolute interest in real estate vests in intestate heirs. Here the heirs are RAMAL JOHNSON, CYNTHIA JOHNSON, and DARRYL A. JOHNSON.

DADDVI A JOHNSON

STATE OF ILLINOIS, COUNTY OF COOK) ss.

SIGNED AND SWORN before me by DARRYL A. JOHNSON on this date of

Notary Public

My commission expires

ELAINE RIVERA Official Seal

Notary Public - State of Illinois My Commission Expires Oct 29, 2024 COUNTY – ILLINOIS TRANSFER STAMP

EXEMPT UNDER PROVISIONS OF PAR.

E SECTION 31-45, REAL ESTATE

TRANSFER TAX LAW, 35/LCS 200/31-45.

DATE 4/80/

nerell & flyaris.

Suver, Seller or Representative

2212315028 Page: 2 of 3

UNOFFICIAL COPY LEGAL DESCRIPTION

LOT 40 IN BLOCK 1 IN THE WEST CHICAGO LAND COMPANY'S SUBDIVISION OF THE SOUTH 1/2 OF SECTION 10, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 16-10-403-031-0000

Address: 4020 W. Carroll Ave., Chicago, Illinois 60624

dress:

Probably Or Cook County Clork's Office

COOK COUNTY CLERK VITAL RECORDS

				CHIC	AGO, IL	LINO12		
			MEDI	CAL CE	RTIFIC	ATE OF	DEATH	
		200 - 120 64 - 450		独 議				

DECEDENT'S LEGAL NAME ETTA BEA JOHNSON SEX: DATE OF DEATH FEMALE MAY 01:2017
COUNTY OF DEATH COOK 72 YEARS DATE OF BIRTH JULY 09, 1944
CITY OR TOWN HOSPITAL OR OTHER INSTITUTION NAME 4020 W CARROLL
PLACE OF DEATH DECEDENT'S HOME
BIRTHPLACE SOCIAL SECURITY NUMBER STATUS AT TIME OF DEATH. SURVIVING SPOUSE/CIVIL UNION PARTNERS MAIDEN NAME: EVER IN U.S. ARMED SUNFLOWER MS 426-94-6864 DIVORCED FROM MARRIAGE FORCES? NO
RESIDENCE APT. NO. CITY OR TOWN INSIDE CITY LIMITS? 4020 W CARROLL YES
COUNTY STAT ZIP.CODE PATHERICO PARENTS NAME PRIOR TO FIRST MARRIAGE/GIVIL UNION MOTHERICO PARENTS NAME PRIOR TO FIRST MARRIAGE/GIVIL UNION JESSIE LEE SMITH
INFORMANT'S NAME RAMAL JOHNSON RELATIONSHIP MAILING ADDRESS 6400 S WINCHESTER AVE CHICAGO, IL 60636
METHOD OF DISPOSITION LOCATION - CITY OR TOWN AND STATE DATE OF DISPOSITION BURIAL DAY 13, 2017
FUNERAL HOME SMITH & THOMAS FUNERAL HOME, 5708, V. M. DISON, CHICAGO, IL, 60644
FUNERAL DIRECTOR'S NAME ILENE JOHNSON FUNERAL DIRECTOR'S ILLINOIS EICENSE NUMBER 034016371
LOCAL REGISTRAR'S NAME DAVID ORR DAVID ORR DAVID ORR
CAUSE OF DEATH A PART I EMPHYSEMA
IMMEDIATE CAUSE a 16 YEARS
(Final disease of condition Due to (or as a Insequence of)
resuling in death); b. DIABETES: 31: YEARS
C. HYPERTENSION Due to (or as a consequence of)
Due to (or as a consequence of t
PART II Enter other significant conditions contributing to death but not resulting in the underlying cause given in PAR. WAS ANAUTORSY PERFORMED? NO
WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A
FEMALE PREGNANCY STATUS UNKNOWN VATURAL
DATE OF INJURY PLACE OF INJURY INJURY AT WORK?
LOCATION OF INJURY
DESCRIBE HOW INJURY OCCURRED. IF TRANSPIRED TION INJURY, SPECIFY:
ATTEND THE DECEASED? DATE LAST SEEN ALIVE WAS MEDICAL EXAMINER OR DATE PRONOUNCED TIME OF DEATH CORONER CONTACTED? NO 4:00 PM
CERTIFIER PHYSICIAN MAY 10, 2017
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH PHYSICIAN'S LICENSE NUMBER 036090426 036090426
1936975



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 Cook County Clerk

