Doc# 2309415001 Fee \$88.00

RHSP FEE: \$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH COOK COUNTY CLERK DATE: 04/04/2023 09:50 AM PG: 1 OF 4

## AFFIDAVIT OF HEIRSHIP

# FOR BEVERLY J. THOMPSON Clart's Office

PREPARED BY

ATTY. JEFFREY D. BURT 17 E. MONROE ST., #190 CHICAGO, IL 60603 JEFFBURT@BURTLAWCENTER.COM (773) 688-8754

## UNOFFICIAL SEPONT TENANCY AFFIDAVIT

STATE OF ILLINOIS **COUNTY OF COOK** 

Lori Edwards being duly sworn states that she resides at 6817 S. Crandon Avenue, Unit #1 in the City of Chicago, IL. That she was acquainted with Beverly J. Thompson deceased who, at the time of death, was one of the owners of the land in Cook County, Illinois, described as:

11207 S. Emerald Avenue, Chicago, IL 60643

PIN: 25-21-109-002-0000

That the deceased died February 21, 2023, as evidence by a certified copy of death certificate of the deceased							
attached hereto.							
That the deceased died:							
x Leaving no Last Will & Testament.							
$\Box$ Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should							
be filed with the Clerk of the Probate Division of the Circuit Court ofCounty, Illinois.							
Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division o							
Circuit Court ofCounty, Illinois about							
That the total value of the estate of the deceased, including both real and personal property owned by the deceased							
either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of							
\$100,000.00 dollars.							
Affiant makes this affidavit for the purpose of inducing Chicago Title Company, LLC to issue its Title Insurance Policy,							
describing the above-mentioned property.							
IN WITNESS WHEREOF, the undersigned have executed this document on the date(s) cet forth below.							
En: Eller 3/21/23							
Signature Date  Date							
Print Name							
Subscribed and sworn to before me this 121 of Warch 2025							
Stold seed . Kul							
OFFICIAL SEAL JEFFREY D. BURT NOTARY PUBLIC, STATE OF ILLINOIS							

Affidavit (Deceased Joint Tenant) ILD0263.doc 1 Updated: 04.25.16

### **UNOFFICIAL COPY**

**Exhibit A - Legal Description** 

11207 S. Emerald Ave., Chicago, IL 60628

PIN: 25-21-109-002-0000

LOT 33 IN BLOCK 10 IN FITTH ADDITION TO SHELDON HEIGHTS, A SUBDIVISION IN THE WEST HALF OF THE NORTH WEST QUARTER OF SECTION 21, TOWNSHIP 37 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN CCOR COUNTY, ILLINOIS.

### COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS

٠.			MEDIC	AL CERHIFIC	AIL OF DEA	JH		
	STATE FILE NUMBER 2022 00	159549					DATE IS	SUED 7/5/2022
	DECEDENT'S LEGAL NAME JOSEPH L'THOMPSON	建型 第				SEX MALE	DATE OF DEATH JUNE 27, 202	2
	COUNTY OF DEATH		AGE AT LAST BIRTI	IDAY		F BIRTH UARY 27, 1931		
	CITY OR TOWN EVERGREEN PARK			en black en en	OTHER INSTITUTION	ON NAME OF MARY MED	ICAL CENTER	
	PLACE OF DEATH		87 - 1965 - 1 338 - 1845.					
100	BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY 324-22-015	NUMBER STATUS 4 MARK	- 19.51 term 2017		OUSE/CIVIL UNION PAR Y BURROWS	2000 - 2005   1000 Back	ORCES? UNKNOWN
	RESIDENCE 11207 S EMERALD AVE			APT. NO.	CHICAGO		The state of the late.	IDE CITY LIMITS?
	COUNTY STAT		DENNIS THO	NAME PRIOR TO FIRST MA MPSON	ARRIAGE/CIVILUNION	MOTHER/CO PARE	NES NAME PRIOR TO FIRST OMPSON	MARRIAGE/CIVIL UNION
West.	INFORMANT'S NAME LORI M EDWARDS		RELATIONSHI DAUGH	2 3 3 4 5 5 5 5 5 C C C C C C C C C C C C C C	MAILING ADD		1) CHICAGO, IL 606	49
,	METHOD OF DISPOSITION BURIAL		OF DISPOSITION FRLY CEMETE	RY	LOCATION BLUE ISLA		STATE DATE OF DIS	
	FUNERAL HOME CAGE MEMORIAL CHAP	EL FUNERAL AI	ND CFE ATION	NINC, 7651 S JEF	FERY BLVD, C	HICAGO, IL, 60	649	
24.0	FUNERAL DIRECTOR'S NAME BRITTANNIE BRANKER					FUNERAL DIRE 03401631	CTOR'S ILLINOIS LICEN 2	SE NUMBER
\$	LOCAL REGISTRAR'S NAME KELLY A KUZLIK					DATE FILED W JULY 1, 2	TH LOCAL REGISTRAR 022	
:	CAUSE OF DEATH PART I	ACUTE PNEUM	OTHORAX				TE VEEN ATF	DAYS
	(Final disease or condition resulting in death)	b. COVID PNEUMO		Due to (or as a consequence	of)		ROXIMA AL BETV AND DE	
23.44.4				Due to (or as a consequence	of		APPR INTERVA ONSET	DAYS
		c ACUTE STREPT	FOCOCCUS SEPT				≥ 0	DAYS
		afficie de la compa- de de la compa- de de la compa-		Due to (or as a consequence	of the contract of			
	PART II Enter other significant con	ditions contributing	to death but not resu	lting in the underlying c	ause given in PAR	W	S AN AUTOPSY PERFOR	RMEO? NO
2000						00	RE AUTOPSY FINDINGS MPLETE CAUSE OF DEA	TH? N/A
31	PEMALE PREGNANCY STATUS NOT APPLICABLE						NNER OF DEATH	
	DATE OF INJURY	The state of the s	ME OF INJURY	PLACE OF IN.	JURY			INJURY AT WORK?
	LOCATION OF INJURY		27 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
11.11	DESCRIBE HOW INJURY OCCURR	ED					(FTRANSPORTATI	ON INJURY SPECIFY
	ATTEND THE DECEASED?	DATE LAST SEEN ALI	VE WAS ME	DICAL EXAMINER OR	DAT	E PRONOUNCED:	किंद्र के किंद्र के कि	ME OF DEATH

036142187

TIME OF DEATH

06:50:AM

DATE CERTIFIED
JUNE 30, 2022

PHY**SICIAN'S** LICENSE NUMBER



YES:

PHYSICIAN:

DATE LAST SEEN ALIVE

JUNE 26, 2022

SOPHIA RAHMAN MD, 2800 WEST 95TH ST, EVERGREEN PARK, ILLINOIS, 60805

NAME ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH

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

WAS MEDICAL EXAMINER OR

CORONER CONTACTED?



