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Doc#. 2325757037 Fee: \$107.00

Karen A. Yarbrough Cook County Clerk

Date: 09/14/2023 08:40 AM Pg: 1 of 3

AFTER RECORDING, MAIL TO: SATURN TITLE, LLC 1030 W. HIGGINS RD. SUITE 365 PARK RIDGE, IL 60068

> 2335049 143

AFFIDAVIT OF HEIRSHIP

| ST | ATE OF ILLINOIS | COE MARIA B OCAMPO | |
|------------|--|--|-----|
| CC | OUNTY OF COOK ESTATE | Deceased, | 1. |
| On firs | thisday ofULY20_23, ICR | RESENCIO ARROYO, after bein wit: | g |
| 1. | My name is CRESENCIO ARROYO and, to my understanding, am otherwise competent to give | , and I am over the age of twenty-one (21) years of ag | e |
| 2. | I reside at 1618 DAYLILY DR ROMEOVILLE IL 60446 | | |
| 3. | I am the SON (state relation | nship to Jeceased) and knew him/her in his/her lifetim | e. |
| 4. | The decedent, MARIA B OCAMPO commonly known as: 2140 N LARAMIE CHICAGO IL 606 (legal description and PIN attached). | , was the owner of the property | |
| 5. 5. | He/She died on SHE MAPCH 6 2013 of COOK . State of Illinois. The decedent was married one (1) time(s), toALBERT | in the City of CHICAGO, Cour | nty |
| 7. | Q | ecedent, as follows, and are assumed to be of majority | 200 |
| | unless otherwise noted: | 4- NEREO ARROYO 7- ROSA PEREZ | _ |
| | 2- YOLANDA ARROYO | 5- ALFONSO ARROYO 8- ELIA DELGAD | О |
| | 3- JORGE ARROYO | 6- JUANITO ARROYO | |
| 3. | No persons were adopted by the decedent. | | |
|). | The parents of the decedent were SANTANA | ASUILAR (DECEASED) all both said parents are now deceased. | nd |
| ١٥. | a) Pursuant to the Last Will and Testament of | | ì |
| | No | 0 MM OR IORIAMENI | |

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b) The decedent died intestate.

| | \$ | and | dollars. |
|-----|---|---|---------------------|
| | either individually or in joint tenancy at the time | of the death of the deceased, does not exceed | the sum of |
| 11. | That the total value of the estate of the deceased | , including both real and personal property own | ned by the deceased |

12. The forgoing is based upon my own personal knowledge and belief, is true, and if called upon as a witness I would competently and consistently testify thereto.

THERE HAS BEEN NO JUDICIAL DETERMINATION REGARDING THIS AFFIDAVIT.

FURTHER AFFIANT SAYETH NOT.

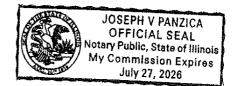
AFFIANT

SUBSCRIBED AND SWORN TO ME THIS 5 14

OF sokaler

, 20 **23**

NOTARA PUBLIC



Prepared by and After Recording Mail to: Anthony V. Panzica, 2510 W. Irving Park Rd., Unit B, Chicago, IL, 60618 Phone: 773-539-5853 Email: anthonyvpanzica@gmail.com

File# 2335049

Property Address: 2140 N. Laramie Ave. Chicago IL 60639

PIN#: 13-33-112-026-0000

Legal:

LOT 9 AND SOUTH 12 1/2 FEET OF LOT 8 IN BLOCK 3 IN FOSS AND NOBLE'S SUBDIVISION OF PART OF THE EAST HALF OF THE EAST HALF OF THE NORTHWEST QUARTER CF SECTION 33, TOWNSHIP 40 NORTH, PANGS 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED NOVEMBER 23, 1900 IN BOOK 79 OF PLATS, PAGE 30, 43 DOCUMENT 3035572, IN COOK COUNTY ILLINOIS.

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CERTIFICATION OF DEATH RECORD

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

| STATE FI | E NUMBER | 2013 | 0020170 | | | 美華 | | | | | | DATE | SSUED | 2/10/202 |
|----------|--------------|------|-------------|-------|------------|----------------|-------|------|----------|-----|-----|------------|----------|----------|
| DECEDE | NT'S LEGAL N | JAME | ar artifett | . 197 | A 18 1 1 1 | . 包包 . | 44.66 | 6.87 | 83.83.23 | SEX | DAT | E OF DEATH | 4.25.436 | |

| DECEDENT'S LEGAL NAME MARIA B OCAMPO | | untiles — A A Abril 1999 Bld - Chicket - Arthur - Arthur - Chicket - Chicke | re of death NARCH 06, 2013 |
|--|---|---|--|
| COUNTY OF DEATH: COOK | AGE AT LAST BIRTHDAY 73 YEARS | DATE OF BIRTH AUGUST 15, 1939 | |
| CITY OR TOWN CHICAGO | HOSPITAL OR OTI 2140 N LARA | HER INSTITUTION NAME. AMIE: | |
| PLACE OF DEATH DECEDENT'S HOME | | | |
| BIRTHPLACE SOCIAL SECU MEXICO | IRITY NUMBER STATUS AT TIME OF DEATH WIDOWED | SÚRÝIVÍNG SPOUSE/CIVIL ÚNION PARÍNER'S M | AIDEN NAME EVER IN U.S. ARMED FORCES? NO |
| RESIDENCE 2140 N LARAMIE | | TY OR TOWN CHICAGO | INSIDE CITY LIMITS? YES |
| COOK STATE ZIP CODE | ALBERTO OCAMPO | SANTANA AGUIL | IE PRIOR TO FIRST MARRIAGE/CIVIL UNION AR |
| INFORMANTS NAME CRESENCIO ARROYO | RELATIONSHIP SON | MAILING ADDRESS 1618 DAYLILY DR, ROMEOVIL | |
| | L/LE OF DISPOSITION MOUNT OLIVE CEMETERY | LOCATION - CITY OR TOWN AND STATE CHICAGO, IL | DATE OF DISPOSITION MARCH 12, 2013 |
| FUNERAL HOME ALVAREZ FUNERAL DIRECTORS P. | G., 25(AN SIGERO AVE, CHICAGO, IL, | 60639 | |
| FUNERAL DIRECTOR'S NAME SUSAN ALVAREZ | | FUNERAL DIRECTOR'S 034011737 | ILLINOIS LICENSE NUMBER |
| LOCAL REGISTRAR'S NAME DAVID ORR | | DATE FILED WITH LOG MARCH 11, 201 | 医结节 网络克拉斯特尔 经免税 网络拉拉 网络拉拉 |
| CAUSE OF DEATH PART MULTIPLE IMMEDIATE CAUSE 9. (Final disease or condition resulting in death) 5. | Due to (or as a consequence of). Due to (or as a consequence of). | at Will A Condid W | INTERVAL BETWEEN ONSET AND DEATH |
| c. | | | |
| PART II. Enter other significant conditions contrib | Due to (or as a consequence of): utling to death but not resulting in the underlying cause | | JTOPSY, PERFORMED? NO |
| | | were aut | OPSY FINDINGS USED TO CAUSE OF DEATH? N/A |
| FEMALE PREGNANCY STATUS NOT APPLICABLE | | WINNER C NATUR | |
| DATE OF INJURY | TIME OF INJURY PLACE OF INJURY | | INJURY AT WORK? |
| LOCATION OF INJURY | | | |
| DESCRIBE HOW INJURY OCCURRED: | | IF | TRANSP)RT. (TION:INJURY, SPECIFY: |
| ATTEND THE DECEASED? DATE LAST SEE NO UNKNOW | | DATE PRONOUNCED | TIME OF DEATH 10:30 PM |
| CERTIFIER PHYSICIAN | | | ATE CERTIFIED MARCH 08, 2013 |
| NAME ADDRESS AND ZIP CODE OF PERSON CO ERNESTINE HAMBERG MD, 1340 S | MPLETING CAUSE OF DEATH DAMEN, CHICAGO, ILLINOIS, 60608 | | PHYSICIAN'S LICENSE NUMBER 036-042220 |



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.

To Dog

Karen A. Yarbrough Cook County Clerk

