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Doc#. 2401806272 Fee: \$107.00

Karen A. Yarbrough

Cook County Clerk

Date: 01/18/2024 02:51 PM Pg: 1 of 5

Mail To/

Prepared By:

Daniel C Balanoff

10100 S Ewing

Chicago IL 60617

Property of Cook County Clerk's Office

Affidavit of Heirship

File Number: 23159013 1/6

Mail to:

Old Republic National Title

9601 Southwest Highway

Oak Lawn, IL 60453

312-641-7799

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AFFIDAVIT OF HEIRSHIP

STATE OF INDIANA)
) ss
COUNTY OF LAKE)

File No.: 23159013

ESTATE OF RICHARD P. MELENDEZ, Deceased.

And now on this 11 day of July, 2023, KRISTEN L. MELENDEZ, after being first duly sworn under oath, testifies and deposes as follows, to wit:

1. My name is KRISTEN MELENDEZ, I am over the age of twenty-one (21) years of age and, to my understanding, am otherwise competent to give testimony.
2. I reside at 9143 Hawthorne Dr., Munster, IN 46521.
3. I am the daughter of RICHARD P. MELENDEZ (*state relationship to deceased*) and knew him/her in his/her lifetime.
4. RICHARD P. MELENDEZ, owner of the property commonly known as 9212 S. Brandon, (see legal description attached) died on DECEMBER 29, 2015 in the City of Chicago, County of Cook, State of Illinois.
5. The decedent was married one (1) time(s), to ELAINE F. MELENDEZ.
6. Three (3) children were born to the decedent and no children were adopted or born out of wedlock, whose names are as follows, and are assumed to be of majority age, unless otherwise noted:

KRISTEN L. MELENDEZ, daughter

RICHARD MELENDEZ, son

JEANNE-MARIE MELENDEZ, daughter

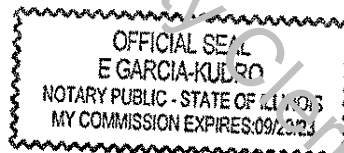
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7. No persons were adopted by the decedent.
8. The parents of the decedent were Lupe A/K/A Guadalupe Melendez and Angeline Melendez, both said parents are now deceased.
9. a) Pursuant to the Last Will and Testament of _____, the decedent herein, left his/her entire estate, both real and personal, to _____.
- b) The decedent died intestate.
10. 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 Seventy Thousand dollars.
11. The foregoing 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.

FURTHER AFFIANT SAYETH NOT.

[Signature]
AFFIANT

SUBSCRIBED AND SWORN TO
BEFORE ME THIS 11 DAY
OF July 2023.
[Signature]
NOTARY PUBLIC



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"Exhibit"

CERTIFICATE OF DEATH RECORD

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

STATE FILE NUMBER 2015 0103284

DATE ISSUED 5/9/2023

DECEDENT'S LEGAL NAME RICHARD P MELENDEZ		SEX MALE	DATE OF DEATH DECEMBER 29, 2015	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 73 YEARS	DATE OF BIRTH NOVEMBER 09, 1942		
CITY OR TOWN HARVEY	HOSPITAL OR OTHER INSTITUTION NAME INGALLS MEMORIAL HOSPITAL			
PLACE OF DEATH INPATIENT				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME ELAINE F SUROWIEC	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 14210 CLARK ST	APT. NO.	CITY OR TOWN RIVERDALE	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	FED CODE 00327	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION GUADALUPE S MELENDEZ	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ANGELINE COVARRUBIAS
INFORMANT'S NAME ELAINE F MELENDEZ		RELATIONSHIP WIFE	MAILING ADDRESS 14210 CLARK ST, RIVERDALE, IL, 60627	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION HEIGHT'S CREMATORY	LOCATION - CITY OR TOWN AND STATE CHICAGO HEIGHTS, IL	DATE OF DISPOSITION JANUARY 04, 2016
FUNERAL HOME SADOWSKI FUNERAL HOME, 13300 SOUTH HOUSTON, CHICAGO, IL, 60633				
FUNERAL DIRECTOR'S NAME JOHN F WARD			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014699	
LOCAL REGISTRAR'S NAME NANCY L CLARK			DATE FILED WITH LOCAL REGISTRAR JANUARY 5, 2016	
CAUSE OF DEATH PART I. ACUTE MYOCARDIAL INFARCTION IMMEDIATE CAUSE (Final disease or condition resulting in death) a. _____ Due to (or as a consequence of) b. ISCHEMIC CARDIOMYOPATHY Due to (or as a consequence of) c. SEPSIS Due to (or as a consequence of) 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				
FEMALE PREGNANCY STATUS NOT APPLICABLE			WAS AN AUTOPSY PERFORMED? NO	
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 29, 2015	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 12:43 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED JANUARY 01, 2016	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR MUHAMMED HUSSAIN, ONE INGALLS DRIVE, HARVEY, ILLINOIS, 60426			PHYSICIAN'S LICENSE NUMBER 036131132	

2473671



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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

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LEGAL DESCRIPTION

LOT 6 IN BLOCK 86 IN THE SUBDIVISION BY THE CALUMET AND CHICAGO CANAL AND DOCK COMPANY OF PARTS OF SECTIONS 5 AND 6, IN TOWNSHIP 37 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN.

Address commonly known as:
9212 S Brandon Ave
Chicago, IL 60617

PIN#: 26-06-412-013-0000

Property of Cook County Clerk's Office