

# UNOFFICIAL COPY

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86080428

## AFFIDAVIT

NOW COMES BENJAMIN STEWART, having been duly sworn on oath and deposed and states as follows:

1. That the affiant is 36 years of age.
2. That the affiant was reared by and is acquainted with the ancestral history and affairs of one Janie Williams, deceased.
3. That Janie Williams died December 6, 1984, as evidenced by the attached copy of her death certificate.
4. That Janie Williams was the owner, in fee simple, of the property legally described as:  
Sub Lot 5 in Assessor's Resubdivision of Lots 1 to 11 inclusive in Block 7 in Ashland Second Addition to Chicago, in the N. E. 1/4 of Section 18, Township 39 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois,  
commonly known as: 1843 W. Monroe, Chicago, Illinois. *(7-10-11-007)* **K**
5. That the value of the estate of Janie Williams was less than \$100,000.00.
6. That Janie Williams died testate, as evidenced by the attached copy of her Last Will and Testament.
7. That Janie Williams was married once, to Ben Williams, that her husband predeceased her and that she died a widow.
8. That no children were borne by Janie Williams.
9. That no children were adopted by Janie Williams, but that the affiant Benjamin Stewart was reared by Janie Williams from babyhood.
10. That Janie Williams left no surviving spouse or descendants.

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11. That Janie Williams had four brothers and two sisters, all of whom had predeceased her. The names of Janie Williams' four brothers are unknown to the affiant, however, none of the four brothers lived beyond the age of 18 and none of the four brothers had any descendants. Janie Williams' sister, Ella Ramson, died without leaving any descendants. Janie Williams' sister, Haddie Harvey, had one descendant, Louise Holmes, who is currently residing at 9006 Georgia, Detroit, Michigan. Janie Williams' parents, George Briant and Mary Briant, nee Cleveland, predeceased Jane Williams.

FURTHER AFFIANT SAYETH NAUGHT.

Benjamin Stewart  
Benjamin Stewart

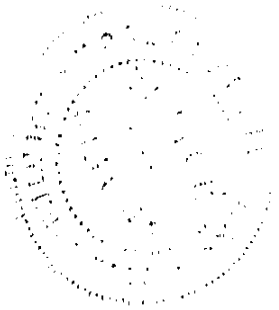
SUBSCRIBED and SWORN to before  
me this 7th day of  
February, 1986.

Dan Williams  
Notary Public

My Commission Expires Mar. 8, 1989

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10-12-1998

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Dec. 10, 1984

STATE OF ILLINOIS  
COUNTY OF COOK SS  
CITY OF CHICAGO

I, **CONNIE C. EDWARDS M.D. M.P.A.**, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS OF THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO. THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY AS A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID  
WHEN MULTICOLOR SEAL AND  
BLUE SIGNATURE ARE AFFIXED

STATE FILE NUMBER  
623986

MEDICAL CERTIFICATE OF DEATH

FIRST MIDDLE LAST		SEX		DATE OF DEATH (MONTH, DAY, YEAR)	
Williams		2 Female		December 6, 1984	
CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		DATE OF BIRTH (MO., DAY, YEAR)	
USA		10. Widowed		September 10, 1903	
USUAL OCCUPATION		KIND OF BUSINESS OR INDUSTRY		COUNTY OF DEATH	
Nurse		Hospital		Cook	
CITY, TOWN, OR VILLAGE		CITY		STATE	
Chicago		Cook		Illinois	
MOTHER—MAIDEN NAME		MIDDLE		LAST	
N/A		Cook		Illinois	
RELATIONSHIP		MAILING ADDRESS (STREET AND NO. OR R. F. D., CITY OR TOWN, STATE, ZIP)		APPROXIMATE INTERVAL BETWEEN DEATH AND DEATH CERTIFICATE	
Clerk		17c. 1753 W. Congress Pkwy Chgo Ill 60612		Immediate	
DEATH WAS CAUSED BY.		FATHER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)			
(a) Cardio Pulmonary Arrest					
(b) Metastatic Colon Carcinoma					
(c)					
SIGNIFICANT CONDITIONS, CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART 1 OR 2		EMPOWERY (YES OR NO)		IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?	
		19g. Yes		20c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
MAJOR FINDINGS OF OPERATION		HOUR OF DEATH		DATE SIGNED (MO., DAY, YR.)	
		21c. 11:08 A.M.		December 6, 1984	
ATTENDING PHYSICIAN (TYPE OR PRINT)		DATE OF DEATH		ILLINOIS LICENSE NUMBER	
Connie C. Edwards M.D.		December 6, 1984		22a. 36-45935	
NAME OF CERTIFIER (TYPE OR PRINT)		FURNEL DIRECTION'S BIRTHS LICENSE NUMBER			
Connie C. Edwards M.D.		7990			
ADDRESS OF PHYSICIAN (TYPE OR PRINT)		STATE		DATE (MONTH, DAY, YEAR)	
1753 W. Congress Pkwy Chgo Ill 60612		Illinois		12-11-1984	
CITY OF TOWN		LOCATION		DATE REC'D. BY LOCAL REGISTRAR (MONTH, DAY, YEAR)	
Oakridge		24c. Hillside		DEC 10 1984	
NAME		STREET AND NUMBER OR R. F. D.		CITY OR TOWN	
Samuel L. Lewis		3246 W. Jackson Chicago, Illinois 60624		FURNEL DIRECTION'S BIRTHS LICENSE NUMBER	
LOCAL REGISTRAR'S SIGNATURE		FURNEL DIRECTION'S BIRTHS LICENSE NUMBER		7990	
LOCAL REGISTRAR'S SIGNATURE		DATE (MONTH, DAY, YEAR)			
Connie C. Edwards M.D.		12-10-1984			

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DEPT-01 RECORDING \$13.25  
T#2222 TRAN 0363 02/27/86 14:30:00  
#3289 #R \*-86-080428

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