

UNOFFICIAL COPY

AFFIDAVIT OF HEIRSHIP

Record 1 of 2

Estate of

93011214

Anthony Valenti,
deceased

Nancy Valenti on oath states:

1. The decedent, Anthony Valenti, died at Chicago, Illinois on January 8, 1983 at the age of 71 years. (Death Cert. Attached)
2. I am of legal age. I reside at 2044 North Lavergne, Chicago, Illinois. I am the surviving spouse of the decedent.
3. The decedent was married once to myself, Nancy Valenti. The marriage was terminated by the decedent's death.
4. The following children and no others were born to or adopted by the decedent: Joseph Valenti and Debra Grimaldi.
5. Joseph Valenti is living, of legal age and mentally competent.
6. Debra Grimaldi is living, of legal age and mentally competent.
7. The decedent has died without a will. The gross value of the decedent's estate is less than \$ 25,000.00.
8. The legal description of the decedents real estate is...

Lots 6 and 7 in Block 21 in Chicago Land Investment Company's Subdivision in the NE 1/4 of Sec. 33, Township 40 North, Range 13, East of the 3rd Principal Meridian, In Cook County, Ill.

P.I.N. 13-33-226-021-0000

A/K/A 2044 N. Lavergne, Chicago, Illinois

93011214

Based on the foregoing, the decedent left surviving as his only heirs the following who are of legal age and mentally competent...

- Nancy Valenti - surviving spouse
- Joseph Valenti - surviving son
- Debra Grimaldi - surviving daughter

Nancy Valenti
Affiant

Signed and sworn before me
this 22nd day of August, 1992

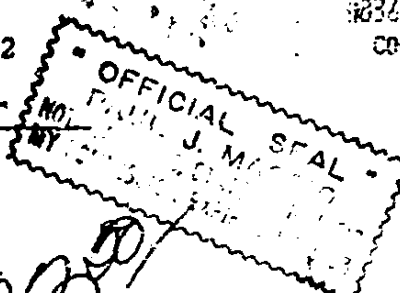
Notary Public

(Seal)

Prepared by:

Paul J. Maggio, Esq.
7824 W. Belmont Ave.
Chicago, Illinois 60634

DEPT. OF RECORDING
11111 1111 7847 01/06/93 15:22:00
83369 # 8-93-011214
COOK COUNTY RECORDER



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11/21/2011

Property of Cook County Clerk's Office

11/21/2011

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11/21/2011

DAVID D. ORR, County Clerk of the County of Cook in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files of said County.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

David D. Orr
County Clerk

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

600511

NEGOTIATION
DISTRICT NO 10.10
REGISTERED
NUMBER

1. DECEASED - NAME FIRST MIDDLE LAST SEX DATE OF BIRTH MONTH, DAY, YEAR CITY OF BIRTH COUNTY, STATE, YEAR

ANTHONY VALENTI 2. MALE 3. JANUARY 8, 1983

4. RACE 5. ETHNIC ORIGIN 6. AGE 7. DATE OF BIRTH MONTH, DAY, YEAR 8. CITY OF BIRTH COUNTY, STATE, YEAR

WHITE Italian 71 - - - OCT. 12, 1911 Cook

9. CITY, TOWNSHIP, AND STATE DISTRICT NUMBER 10. HOSPITAL OR OTHER INSTITUTION 11. TYPE OF PATIENT

Chicago MT SINAI HOSPITAL MEDICAL CENTER 12. PATIENT

13. STATE OF DEATH COUNTY 14. MARRIED, NEVER MARRIED, SEPARATED, DIVORCED, WIDOWED 15. NAME OF SURVIVING SPOUSE BUSINESS NAME, IF WIFE

ILLINOIS U.S.A. 16. MARRIED 17. Nancy Martorano

18. SOCIAL SECURITY NUMBER 19. OCCUPATION 20. KIND OF BUSINESS OR INDUSTRY 21. WAS DECEASED EVER IN U.S. ARMED FORCES? (CHECK YES OR NO) 22. WAR OR DATES OF SERVICE

356 09 5154 Clerk County of Cook No None

23. RESIDENCE STREET AND NUMBER 24. CITY, TOWNSHIP, AND STATE DISTRICT NO. 25. COUNTY 26. STATE

2044 N. LAVERGNE CHICAGO YES COOK ILLINOIS

11. FATHER - NAME LAST FIRST MIDDLE MOTHER - MAREN NAME LAST FIRST MIDDLE

Joseph - Valenti Angeline - Parisi

12. EMPLOYER NAME TYPE OR PARTY RELATIONSHIP MAILING ADDRESS

Nolana Kuezer CLERK 1500 S FAIRFIELD-HOSPITAL RECORDS

13. DEATH WAS CAUSED BY (CHECK ONLY ONE CAUSE PER LINE FOR 13a, 13b, AND 13c) ADDITIONAL REASONS, PREVIOUS MORTAL AND DEATH

PART I

13a. CARDIORESPIRATORY ARREST

13b. RESPIRATORY FAILURE, RENAL FAILURE

13c.

14. OTHER SIGNIFICANT CONDITIONS (CONTINUE CONDITIONS TO WHICH BUT NOT RELATED TO CAUSE GIVEN IN 13a, 13b, OR 13c)

15. DATE OF OPERATION, IF ANY 16. MAJOR FINDINGS OF OPERATION

17. DATE OF OPERATION, IF ANY 18. MAJOR FINDINGS OF OPERATION

19. DID YOU ATTEND THE DECEASED AND LAST BECAME UNLIVE ON? (CHECK YES OR NO) 20. HOUR OF DEATH

DID NOT HIM/ JANUARY 8, 1983 NO 21c. 4:26 A.

21. SIGNATURE OF CERTIFIER (TYPE OR PRINT) 22. DATE SIGNED MONTH, DAY, YEAR

W. Nawarawong 23. JANUARY 8, 1983

24. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT) 25. ILLINOIS LICENSE NUMBER

WEERACHAI NAWARAWONG M.D. 1500 S FAIRFIELD CHICAGO IL 26. 36-61629

27. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) 28. ILLINOIS LICENSE NUMBER

ALLAN J FREDLAND M.D. 5214 N WESTERN CHICAGO, IL

29. MANNER OF BURIAL (CHECK ONE) 30. CEMETERY OR CREMATORIUM - NAME 31. LOCATION 32. DATE

33. FUNERAL HOME 34. ADDRESS

35. SIGNATURE OF FUNERAL HOME 36. DATE SIGNED MONTH, DAY, YEAR

37. SIGNATURE OF DECEASED 38. DATE SIGNED MONTH, DAY, YEAR

39. SIGNATURE OF CERTIFIER (TYPE OR PRINT) 40. DATE SIGNED MONTH, DAY, YEAR

39. SIGNATURE OF CERTIFIER (TYPE OR PRINT) 40. DATE SIGNED MONTH, DAY, YEAR

3959

CAN 10 1983

VR 200 205, 206

MADE BY 1978 U.S. STANDARD CERTIFICATE

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1911
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