

UNOFFICIAL COPY

93030197

93030197

STATE OF ILLINOIS)
COUNTY OF COOK)

AFFIDAVIT OF HEIRSHIP

JOANNE M. SHINNICK, being duly sworn on oath, states:

1. That she personally knew the Deceased, is of legal age and resides at 3822 S. Union, Chicago, Illinois.

2. That the decedent, George W. Shinnick, Jr., died on May 18, 1992 and at the time of his death was a widower and a resident of Chicago, Illinois, County of Cook.

3. That decedent's spouse namely: Celine (Dougherty) Shinnick predeceased decedent on July 6, 1988.

4. That George W. Shinnick, Jr., and Celine (Dougherty) Shinnick were married only once to each other.

5. Nine children were born of the marriage of George W. SHINNICK, Jr. and Celine (Dougherty) Shinnick

- THOMAS J. SHINNICK (Divorced - Donna Frieri)
- NADINE S. PERMINAS (Married - David Perminas)
- TERRENCE G. SHINNICK (Married - Suzanne McElmeel)
- TIMOTHY M. SHINNICK (Married - LuAnne Pecho)
- CELINE S. FLYNN (Married - Michael Flynn)
- GEORGE W. SHINNICK III (Married - Kimberly Schaller)
- MICHAEL K. SHINNICK (Bachelor)
- KATHLEEN S. DUDDLESTON (Married - Thomas Duddelston)
- JOANNE M. SHINNICK (Spinster)

6. Neither CELINE SHINNICK nor GEORGE W. SHINNICK, JR., adopted any children nor had any children outside the marriage.

7. That decedent owned 1/2 the property located at 3758 South Union, Chicago, Illinois.

8. That decedent died intestate.

DEPT-01 RECORDING \$25.50
TRAN 5574 01/13/93 13:17:00
#7965 # *-93-030197

93030197

2550
1

UNOFFICIAL COPY

Property of Cook County

ADIERNE M. GEARY
2650 W. 51ST ST.



CHICAGO, ILL 60632

Clerk's Office

93030197

UNOFFICIAL COPY

9. That based on the foregoing, the decedent left surviving
as her heirs the following:

THOMAS J. SHINNICK
NADINE S. PERMINAS
TERRENCE G. SHINNICK
TIMOTHY M. SHINNICK
CELINE S. FLYNN
GEORGE W. SHINNICK III
MICHAEL K. SHINNICK
KATHLEEN S. DUDDLESTON
JOANNE M. SHINNICK

AND FURTHER AFFIANT SAYS NAUGHT.


JOANNE M. SHINNICK

Subscribed and Sworn to before me
this 7th day of December, 1992.


Notary Public

98030197

UNOFFICIAL COPY

Property of Cook County Clerk's Office

Please return to:

ADDITIONAL COUNTY FSO.
200 N. WASHINGTON STREET
CHICAGO, IL 60632

93030197

UNOFFICIAL COPY

JUN 15 1992

STATE OF ILLINOIS
 MEDICAL CERTIFICATE OF DEATH
 STATE FILE NUMBER 609437

REGISTRATION DISTRICT NO 16.10
 REGISTERED NUMBER

1. DECEASED-NAME: **GEORGE W. SHINNICK SR.** SEX: **MALE** DATE OF DEATH: **MAY 18, 1992**

2. COUNTY OF DEATH: **COOK** DATE OF BIRTH: **OCT 18, 1925**

3. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: **CHICAGO** NAME OF SURVIVING SPOUSE (MARRIED, IF WIFE): **UNION AVE.**

4. AGE-LAST BIRTHDAY (MRS): **66** UNDER 1 DAY: **3** UNDER 10 DAY: **50** UNDER 1 YEAR: **50** UNDER 1 MONTH: **50**

5. MARRIED, NEVER MARRIED, DIVORCED, WIDOWED: **WIDOWED**

6. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): **CHICAGO, IL**

7. SOCIAL SECURITY NUMBER: **3822 So. Union Ave. CHICAGO**

8. RESIDENCE (STREET AND NUMBER): **350-18-1861** CITY, TOWN, TWP. OR ROAD DISTRICT NO.: **CHICAGO**

9. USUAL OCCUPATION: **PROPRIETOR** KIND OF BUSINESS OR INDUSTRY: **TAVERN**

10. RACE (WHITE, BLACK, AMERICAN INDIAN, OR ISPANO): **WHITE** EDUCATION (SPELLED IN FULL, GRADE COMPLETED): **12**

11. FATHER-NAME: **GEORGE W. SHINNICK SR.** MOTHER-NAME: **MARY O. HEALY**

12. INFORMANT'S NAME (TYPE OR PRINT): **MICHAEL SHINNICK** RELATIONSHIP: **SON**

13. MAILING ADDRESS (STREET AND OR RD, CITY, TOWN, STATE, ZIP CODE): **3758 S. Union CHGO 60609**

14. ILLINOIS CAUSE (Fetal disease or condition resulting in death): **CONGESTIVE CARDIOMYOPATHY**

15. CONDITIONS IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST: **ATRIAL FIBULATION**

16. (b) DUE TO, OR AS A CONSEQUENCE OF: **CEREBRAL VASCULAR ACCIDENT**

17. (c) MAJOR FINDINGS OF OPERATION: **CONGESTIVE CARDIOMYOPATHY**

18. PART I. Other findings (conditions contributing to death but not resulting in the underlying cause given in PART I)

19. DATE OF OPERATION, IF ANY: **MAY 01, 1992**

20. MAJOR FINDINGS OF OPERATION: **CONGESTIVE CARDIOMYOPATHY**

21. (a) DID YOU ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON: **MAY 01, 1992**

21b. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.

22. SIGNATURE: **Dr. Alan M. Zunamon** NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT): **DR ALAN M ZUNAMON M.D. 5160 SOUTH PULASKI CHICAGO ILL 60620**

23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT): **DR ALAN M ZUNAMON M.D.**

24. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY): **WORTH, IL.**

24a. FATHER-NAME: **WORTH, IL.**

24b. MOTHER-NAME: **WORTH, IL.**

24c. STREET AND NUMBER OR H/F D: **634 W. 37 ST. CHGO IL 60609**

24d. CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: **CHICAGO**

24e. STATE: **IL.**

25. FURNERIAL HOME: **McKEON FUNERAL HOME**

25a. FURNERIAL DIRECTOR'S SIGNATURE: **Thomas McKeon**

25b. FURNERIAL DIRECTOR'S LICENSE NUMBER: **10917**

25c. DATE FILED BY LOCAL REGIS (MAY, MONTH, DAY, YEAR): **MAY 20 1992**

25d. LOCAL REGISTRAR'S SIGNATURE: **Thos J. Parkin, M.D.**

25e. DATE FILED BY LOCAL REGISTRAR (MAY, MONTH, DAY, YEAR): **MAY 20 1992**

26. (BASED ON IUPUI'S STANDARD CERTIFICATE)

STATE OF ILLINOIS
 COUNTY OF COOK
 CITY OF CHICAGO

I, VIRGINIA L. PARKER, M.B.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 FOR 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 OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.