

ESTATE OF

FRANK SVEJNOHA

DECEASED

94385082

AFFIDAVIT OF HEIRSHIP

ELLA ROKOS on oath states:

The decedent, FRANK SVEJNOHA, died at Naperville, Illinois on November 8, 1993 at the age of 74 years.

Your affiant is of legal age and resides at 3415 S. 60th Court, Cicero, IL 60650.

I am a sister of the decedent.

The decedent was never married and no children were born to or adopted by the decedent.

The decedent's father was FRANK SVEJNOHA and the decedent's mother was ROSE VICTORA, both of whom predeceased the decedent. They were married once and that was to each other. Two children were born of this marriage and no other children were born to or adopted by either party.

1. FRANK SVEJNOHA, decedent
2. ELLA ROKOS, decedent's sister

DEPT-11 \$25.50
 T43333 TRAN 3119 04/28/94 16:33:00
 4496 ILC *-94-385082
 COOK COUNTY RECORDER

BASED ON THE FOREGOING, decedent left surviving as his only heir at law the following, all of whom survived the decedent, is of legal age and mentally competent:

ELLA ROKOS, decedent's sister

The value of the estate at date of death, did not exceed THIRTY THOUSAND AND NO/00

DEATH CERT ATTACHED

25.50
711

94385082

UNOFFICIAL COPY

Property of Cook County Clerk's Office

94355052

UNOFFICIAL COPY

9 1 3 0 9 0 8 2

That the decedent died leaving a Will, that there are no creditors of the decedent, and that all funeral expenses have been paid.

That the decedent was the sole owner of the real estate legally described as:

LOT EIGHTEEN (18) IN JOHN SKALE'S SUBDIVISION OF THE WEST HALF (1/2) OF THE NORTHWEST QUARTER (1/4) OF THE NORTHEAST QUARTER (1/4) OF THE NORTHEAST QUARTER (1/4) OF SECTION 34, TOWN 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN (EXCEPT THE SOUTH ONE HUNDRED AND FIFTEEN (115) FEET OF THE NORTH ONE HUNDRED AND FORTY EIGHT (148) FEET OF THE EAST FIFTY EIGHT (58) FEET OF THE WEST NINETY ONE (91) FEET THEREOF).

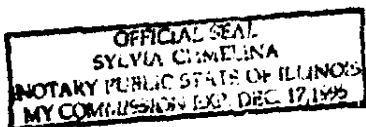
That there are no other heirs of the decedent.

That there are no unknown heirs of the decedent.

Ella Rokos
Ella Rokos, Affiant

Subscribed and Sworn to
before me this 30 day
of MARCH, 1994.

Sylvia Chmelina
Notary



Property of Cook County Clerk's Office

94385082

UNOFFICIAL COPY

S.J. Plak

5717 W. 35th St.

Cicero, IL 60650



Property of Cook County Clerk's Office

94355052

UNOFFICIAL COPY



DECEDENT'S BIRTH NO.	REGISTRATION DISTRICT NO. 22.0	STATE OF ILLINOIS	STATE FILE NUMBER
	REGISTERED NUMBER-- 4090	MEDICAL CERTIFICATE OF DEATH	
Type or Print in PERMANENT INK See Funeral Directors, Hospital, or Physicians Handbook for INSTRUCTIONS	DECEASED-NAME FIRST MIDDLE LAST	SEX	DATE OF DEATH MONTH DAY YEAR
	1 FRANK SVEJNOHA	2 MALE	NOV-8-1993
A	CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER	AGE (LAST BIRTHDAY) (YRS) MO DAY	DATE OF BIRTH (MONTH DAY YEAR)
	4 DUPAGE	5a 74	5b JUNE 28, 1919
B	HOSPITAL OR OTHER INSTITUTION-NAME OF NOT IN EITHER ONE STREET AND NUMBER	IF HOSP. OR INST. INDICATE DOA OF CARE AND ASSISTANT (Y/N)	
	6a NAPERVILLE	6b EDWARD HOSPITAL	6c ER ROOM
C	BIRTHPLACE CITY AND STATE OR FOREIGN (COUNTRY)	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (RESPECIFY)	NAME OF SURVIVING SPOUSE (MARRIED NAME, IF WIFE)
	7 CHICAGO, IL	8a SINGLE	8b N/A
D	SOCIAL SECURITY NUMBER	USUAL OCCUPATION	INDUSTRY OR BUSINESS (Specify if different from usual occupation)
	9 357-01-9014	11a DRAFTSMAN	11b CITY OF CHICAGO
E	RESIDENCE (STREET AND NUMBER)	CITY, TOWN, TWP. OR ROAD DISTRICT NO.	INDEX CITY (YES/NO)
	12a 1525 OXFORD LANE	12b NAPERVILLE	12c YES
F	STATE	ZIP CODE	RACE (WHITE, BLACK, AMERICAN INDIAN OR ALASKA NATIVE)
	13a Illinois	13b	14a White
G	14b. <input type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY:		14c. <input type="checkbox"/> YES <input type="checkbox"/> NO
H	FATHER-NAME FIRST MIDDLE LAST	MOTHER-NAME FIRST MIDDLE (MARRIED) LAST	
	15 FRANK SVEJNOHA	16 ROSE VICTORA	
I	DECEASED'S MARRIAGE (TYPE OR PRINT)	RELATIONSHIP	MAILING ADDRESS (STREET AND NO. OR P.O. CITY OR TOWN STATE ZIP)
	17a MONICA KECOTI	17b NURSE	17c OXFORD LANE
J	18 PART I: Enter the direct cause, or complication that caused it a death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or Septal failure. List only one cause on each line.		18 PART II: Enter secondary conditions contributing to death but not resulting in the underlying cause given in PART I.
	(a) Adenocarcinoma of Stomach with metastases to liver		(b) ANEMIA (Blood loss 2° JA. Recent DVT (R) leg
K	IMMEDIATE CAUSE (Final disease or condition resulting in death)	CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST	
L	DATE OF OPERATION IF ANY	MAJOR FINDINGS OF OPERATION	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?
	20a	20b	20c YES [] NO []
M	11(D) (WHEN NOT) ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON	WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO)	HOUR OF DEATH
	21a 10/26/93	21b YES	21c 11:48 P.M.
N	TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.		DATE SIGNED (MONTH DAY YEAR)
			22b 11/9/93
O	22a SIGNATURE	22c NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)	22d ILLINOIS LICENSE NUMBER
	22a Kevin T. Kopicki	22c A. Piccoli, MD, 2160 S 1ST AVE, MAYWOOD, IL 60153	22d 036-063324
P	23 NAME	BURIAL, CREMATION, REMOVAL (IF ANY)	LOCATION CITY/TOWN STATE
	23 NA	24a Cremation	24b WOODLAWN CEMETERY 24c FOREST PARK, ILLINOIS
Q	FUNERAL HOME	NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP	DATE (MONTH DAY YEAR)
	25a KOPICKI'S HERITAGE FUNERAL HOME 3117 South Oak Park Avenue Eerm, Illinois		24d Nov-10-1993
R	FUNERAL DIRECTOR'S SIGNATURE	FUNERAL DIRECTOR'S LAST LICENSE NUMBER	DATE FILED BY LOCAL REGISTRAR (MONTH DAY YEAR)
	25b Kevin T. Kopicki	25c 034-012134	NOV 10 1993

PRINTED BY AUTHORITY OF THE STATE OF ILLINOIS

This is to certify that this is a true and correct copy of the official record filed with the Illinois Department of Public Health.

Kevin M. Sherin, M.D. Local Registrar

Not valid without the embossed seal of DuPage County Health Department 111 North County Farm Road Wheaton, Illinois 60187



94355052

UNOFFICIAL COPY

Property of Cook County Clerk's Office

94355052