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AFFIDAVIT OF HEIRSHIP

1998-04-01 14:15:36

JINNY E DIGREGORIO EXECUTOR, being duly sworn, states that SHE resides at 16720 WOOD ST #1 in the City of HAZEL CREST

That JINNY E DIGREGORIO was acquainted with JOHN W FRAZIER, deceased, who at the time of HIS death, was the owner of the land in Illinois, described as: 29-30-201-023-000

Sec. 30 Twp. 36 NORTH Range 14

(Use additional sheet, if necessary)

LOT 2 IN R.A. GORE'S SUBDIVISION OF THE EAST 1/2 OF THE NORTHWEST 1/4 OF THE NORTHEAST 1/4 OF SECTION 30 TOWNSHIP 36 NORTH RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN

That JOHN W FRAZIER died 12-19-88 intestate (estate, and a copy of his/her will is attached) as evidenced by a certified copy of death certificate of the deceased attached hereto.

That decedent was not adopted.

(If the decedent was adopted, the following facts should be included.)

That _____ was adopted on _____ by _____ and _____ at which time the decedent was of the age of _____.

(If the decedent was 18 or older when adopted, the following facts should be included:

Before reaching the age of 18 the decedent (had not lived with his/her adopting parents.) or (had lived with his/her adopting parents from the time he/she was _____ years of age.)

That _____, deceased, was married but once and then to _____ (state if now living, if not the affiant, or if deceased, date of death).

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Prepared By:
NORTH STAR
8438 INDIANA STREET
MERRILLVILLE, IN. 46410



WOODSLEY, JOHN
1 1110 N. 14TH
MERRILLVILLE, IN. 46410

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That of that marriage the following children were born:

- WENDELL FRAZIER
- WESLEY FRAZIER
- ELIZABETH FRAZIER

(Give age or at least that same is adult under no legal disability- if deceased, date of death and add heirship information of same, spouse, children, etc.)

That no other children were born to or adopted by the deceased.

If the decedent adopted someone, the following facts, should be included:

The decedent adopted _____ (name) _____ on _____ (date) _____ at which time said adoptee was of the age of _____ .
 [(If the adoptee was 18 years of age or older when adopted, the following facts should be included:
 Before reaching the age of 18, _____ (name) _____, the adoptee, (had not resided with his/her adopting parents) or (had resided with his/her adopting parents from the time said adoptee was _____ years of age.)]

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 \$ 90,000.

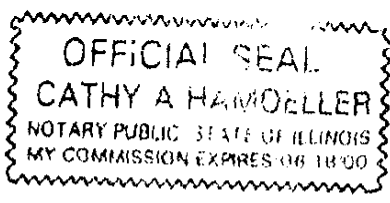
Affiant makes this affidavit for the purpose of inducing Chicago Title Insurance Company to issue its Title Policy, describing the above mentioned property.

Subscribed and sworn to before me by the said

Jimmy Ali Megana
 (Affiant's signature)

this 26th day of March, A.D. 1998.

Cathy A Hamoller
 (Notary Public)
 SEAL



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STATE FILE NUMBER

MEDICAL EXAMINER'S CERTIFICATE OF DEATH

129 DEC 88 STATE OF ILLINOIS

REGISTRATION DISTRICT NO 1610 REGISTERED NUMBER

DECEASED - NAME: JOHN W. FRAZIER JR. SEX: MALE DATE OF BIRTH: 6 May 9, 1921 DATE OF DEATH: 3 DECEMBER 18 1988

DEATH WAS CAUSED BY: PENICILLIN TOXICOLOGIC STUDIES

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH: NONE

20a. PLACE OF INJURY: HOME 20b. HOUR: M. 20c. DATE OF INJURY: 18 DEC 88

21a. MEDICAL EXAMINER'S SIGNATURE: Barry J. Eschultz M.D. 21b. DATE SIGNED: DECEMBER 19, 1988

22. BURIAL: Skyline Memorial Park 23. LOCATION: Monroeville, Illinois

hereby certify that the foregoing is a true and correct copy of the death record for the decedent named in item 1 and that this record was established and filed in my office in accordance with the provisions of the Illinois statutes relating to the registration of births, stillbirths, and deaths.

ATTEST: I, Clerk of Cook County Department of Public Health, Official Title, Chief Deputy Registrar

500 S. Maybrook Drive, Maywood, Illinois 60153

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