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LEGAL FORMS

No. 229 REC
February 2000



Doc#: 0419048146
Eugene "Gene" Moore Fee: \$32.00
Cook County Recorder of Deeds
Date: 07/08/2004 11:16 AM Pg: 1 of 5

QUIT CLAIM DEED JOINT TENANCY Statutory (Illinois) (Individual to Individual)

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Above Space for Recorder's use only

THE GRANTOR(S) Ronald Lewis, Michael Lewis
Ronald Lewis, Michael Lewis
of the City Chicago of _____ County of Cook State of Illinois for the consideration of \$ 10.00 DOLLARS, and other good and valuable considerations _____ in hand paid, CONVEY(S) _____ and QUIT CLAIM(S) _____ to _____

Dale Lewis


(Name and Address of Grantees)

not in Tenancy in Common, but in JOINT TENANCY, all interest in the following described Real Estate situated in Cook County, Illinois, commonly known as 331 N. MASON AVE, 60644, legally described as: _____ (Street Address)

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois. TO HAVE AND TO HOLD said premises not in tenancy in common, but in joint tenancy forever.

Permanent Real Estate Index Number(s): 16-08-401-008-0000
Address(es) of Real Estate: 331 N. MASON - CHICAGO, IL 60644

DATED this: July day of 30 2004

Please print or type name(s) below signature(s)
Dale Lewis (SEAL) _____ (SEAL)
Sytonya Chester (SEAL)  (SEAL)

State of Illinois, County of Cook ss. I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that Dale Lewis

IMPRESS SEAL HERE personally known to me to be the same person _____ whose name _____ subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that _____ signed, sealed and delivered the said instrument as _____ free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

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Given under my hand and official seal, this _____ day of _____ 20____

Commission expires _____ 20____

NOTARY PUBLIC

This instrument was prepared by _____

(Name and Address)

MAIL TO:

(Name)
(Address)
(City, State and Zip)

SEND SUBSEQUENT TAX BILLS TO:

(Name)
(Address)
(City, State and Zip)

OR RECORDER'S OFFICE BOX NO. _____

(City, State and Zip)

Property of Cook County Clerk's Office

GEORGE E. COLE®
LEGAL FORMS

TO

Quit Claim Deed
JOINT TENANCY
INDIVIDUAL TO INDIVIDUAL

FHA FORM NO. 2116 M
Rev. 9/70

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AMC Loan No. 16-02-62423

THIS INDENTURE, Made this **7TH** day of **DECEMBER**, 19**71** between

NOAH LEWIS and OPHELIA LEWIS, his wife

ADVANCE MORTGAGE CORPORATION

, Mortgagee, and

a corporation organized and existing under the laws of **THE STATE OF DELAWARE**
Mortgagee.

WITNESSETH: That whereas the Mortgagor is justly indebted to the Mortgagee, as is evidenced by a certain promissory note bearing even date herewith, in the principal sum of **FIFTYTHREE THOUSAND THREE HUNDRED AND NO/100THS ******* Dollars (\$ **53,300.00**) payable with interest at the rate of **SEVEN** per centum (**7** %) per annum on the unpaid balance until paid, and made payable to the order of the Mortgagee at its office in **SOUTHFIELD MICHIGAN**, or at such other place as the holder may designate in writing, and delivered; the said principal and interest being payable in monthly installments of **ONE HUNDRED FORTY-NINE AND 77/100THS ******* Dollars (\$ **149.77**) on the first day of **72222222**, 19 **72**, and a like sum on the first day of each and every month thereafter until the note is fully paid, except that the final payment of principal and interest, if not sooner paid, shall be due and payable on the first day of **JANUARY**, **1992**

NOW, THEREFORE, the said Mortgagor, for the better securing of the payment of the said principal sum of money and interest and the performance of the covenants and agreements herein contained, does by these presents **MORTGAGE** and **WARRANT** unto the Mortgagee, its successors or assigns, the following described Real Estate situate, lying, and being in the county of **COOK, CITY OF CHICAGO,** and the State of Illinois, to wit:

Lot 8 in Block 1 in the subdivision of the North part of Block 16 in Austin's Second Addition to Austinville, in Section 8, Township 39 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois.

TOGETHER with all and singular the tenements, hereditaments and appurtenances thereunto belonging, and the rents, issues, and profits thereof; and all apparatus and fixtures of every kind for the purpose of supplying or distributing heat, light, water, or power, and all plumbing and other fixtures in, or that may be placed in, any building now or hereafter standing on said land, and also all the estate, right, title, and interest of the said Mortgagor in and to said premises.

TO HAVE AND TO HOLD the above-described premises, with the appurtenances and fixtures, unto the said Mortgagee, its successors and assigns, forever, for the purposes and uses herein set forth, free from all rights and benefits under and by virtue of the Homestead Exemption Laws of the State of Illinois, which said rights and benefits the said Mortgagor does hereby expressly release and waive.

AND SAID MORTGAGOR covenants and agrees:

To keep said premises in good repair, and not to do, or permit to be done, upon said premises, anything that may impair the value thereof, or of the security intended to be effected by virtue of this instrument; not to

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OAK PARK, ILLINOIS

OAK PARK HEALTH DEPARTMENT - OFFICE OF VITAL RECORDS

STATE FILE NUMBER

MEDICAL EXAMINER'S - CORONER'S CERTIFICATE OF DEATH

PERMANENT CERTIFICATE

TEMPORARY CERTIFICATE

REGISTRATION DISTRICT NO. <u>16-34</u>	REGISTERED NUMBER <u>451</u>	DATE OF DEATH (MONTH, DAY, YEAR) <u>218 July 02</u>
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Type of Print in PERMANENT INK See Coroner's or Funeral Director's Handbook for INSTRUCTIONS

DECEASED - NAME FIRST <u>Ophelia</u> MIDDLE <u>Leone</u> LAST <u>Leone</u>	SEX <u>Female</u>	DATE OF DEATH (MONTH, DAY, YEAR) <u>July 11, 2002</u>
COUNTY OF DEATH <u>Cook</u>	AGE - LAST BIRTHDAY (YRS) <u>5a. 67</u>	UNDER 1 YEAR <u>5b. 15b.</u>
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER <u>Oak Park</u>	HOSPITAL OR OTHER INSTITUTION (NAME IF NOT NEITHER GIVE STREET AND NUMBER) <u>West Suburban</u>	IF HOSP. OR INST. INDICATED O.A. OR P.E.M. IN PATIENT (SPECIFY) <u>6c. Iner. Room</u>

DECEASED

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) <u>7. Carlon, MS</u>	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) <u>8a. Divorced</u>	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) <u>8b. None</u>	WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO) <u>9. NO</u>
SOCIAL SECURITY NUMBER <u>4d. 342-37-0606</u>	USUAL OCCUPATION <u>11a. Laborer</u>	KIND OF BUSINESS OR INDUSTRY <u>11b. General</u>	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) <u>12. 12th</u>
RESIDENCE (STREET AND NUMBER) <u>13a. 331 N. Mason Avenue</u>	CITY, TOWN, TWP. OR ROAD DISTRICT NO. <u>13b. Chicago</u>	INSIDE CITY <u>13c. Yes</u>	COUNTY <u>13d. Cook</u>

PARENTS

FATHER - NAME FIRST <u>15. Robert</u> MIDDLE <u>Murphy</u> LAST <u>Murphy</u>	MOTHER - NAME FIRST <u>16. Lucille</u> MIDDLE <u>Chany</u> (MAIDEN) LAST <u>Chany</u>	
INFORMANT'S NAME (TYPE OR PRINT) <u>17a. Dale L. Lewis</u>	RELATIONSHIP <u>17b. son</u>	MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) <u>17c. 331 N. Mason Ave. - Chicago, IL 60644</u>

CAUSE

18. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List the immediate cause on each line.

Immediate Cause (Final disease or condition resulting in death) (a) Arteriosclerotic Cardiovascular Disease

CONDITIONS, IF ANY, WHICH GIVE RISE TO IMMEDIATE CAUSE (a) (b) Metastatic Cancer

STATING THE UNDERLYING CAUSE LAST (c)

CAUSE

PART II. Enter significant conditions contributing to death but not resulting in the underlying cause given in PART I.

Metastatic Cancer

19. NATURAL ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED (SPECIFY) 20. NATURAL

DATE OF INJURY (MONTH, DAY, YEAR) 20b. M 12 02

HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I OR PART II, ITEM 18) 20c. M 12 02

INJURY AT WORK (YES/NO) 20e.

PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BUILDING, ETC.) (SPECIFY) 20f.

LOCATION (CITY, VIL. OR TOWN, OR TWP., R.F.D., DIST. NO., COUNTY, STATE) 20g.

IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS? 20h. YES NO

CAUSE

I CERTIFY THAT, IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INQUIRY, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE, AND DUE TO THE CAUSE(S) STATED, AND THAT THE DECEDENT WAS PROBABLY DEAD ON 21a. July MONTH 2002 YEAR AT 8:23 a.m. TIME

CERTIFIER

CORONER'S - MEDICAL EXAMINER'S SIGNATURE 22a. G.M. Donoghue, MD

CORONER'S PHYSICIAN'S NAME (Type or Print) 23a. 5

DATE SIGNED (MONTH, DAY, YEAR) 22b. July 12 02

DATE SIGNED (MONTH, DAY, YEAR) 23b. July 12 02

DISPOSITION

BURIAL - CREMATION REMOVAL (SPECIFY) 24a. Burial

CEMETERY OR CREMATORY - NAME 24b. Oakridge Cemetery

LOCATION - CITY OR TOWN, STATE 24c. Hillside, IL

DATE (MONTH, DAY, YEAR) 24d. 7/18/02

FUNERAL HOME - NAME, STREET AND NUMBER OR R.F.D., CITY OR TOWN, STATE, ZIP 25a. Wallace Broadview Funeral Home 2020 W. Roosevelt Rd. Broadview, IL 60155

FUNERAL DIRECTOR'S SIGNATURE 25b. Vernon Wallace

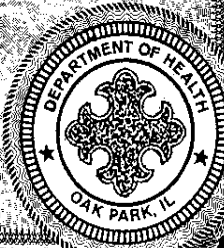
FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 25c. 34-9351

LOCAL REGISTRAR'S SIGNATURE 26a. George Polyzak, MD

DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) 26b. July 16 2002

VR202 (Rev. 1/85) to certify that this is a true and correct copy from the official records Illinois Department of Public Health - Division of Vital Records (BASED ON 1989 U.S. STANDARD CERTIFICATE)

George Polyzak, MD
LOCAL REGISTRAR



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EUGENE "GENE" MOORE

RECORDER OF DEEDS / REGISTRAR OF TORRENS TITLES
COOK COUNTY, ILLINOIS

118 NORTH CLARK STREET • CHICAGO, ILLINOIS 60602-1387

STATEMENT BY GRANTOR AND GRANTEE

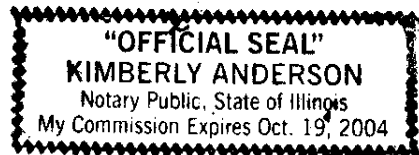
The grantor or his agent affirms that, to the best of his knowledge, the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire title to real estate under the laws of the State of Illinois.

Dated July 5, 2004

Signature [Handwritten Signature]
Grantor or Agent

SUBSCRIBED AND SWORN TO BEFORE
ME BY THE SAID
THIS 5 DAY OF July 2004

NOTARY PUBLIC [Handwritten Signature]



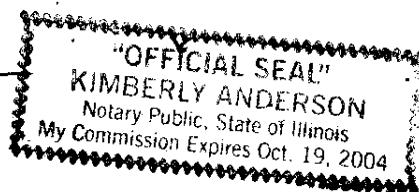
The grantee or his agent affirms and verifies that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire and hold title to real estate under the laws of the State of Illinois.

Date 7-5-04

Signature [Handwritten Signature]
Grantee or Agent

SUBSCRIBED AND SWORN TO BEFORE
ME BY THE SAID
THIS 5 DAY OF July 2004

NOTARY PUBLIC [Handwritten Signature]



Note: Any person who knowingly submits a false statement concerning the identity of a grantee shall be guilty of a Class C misdemeanor for the first offense and of a Class A misdemeanor for subsequent offenses.

{Attach to deed or ABI to be recorded in Cook County, Illinois, if exempt under provisions of Section 4 of the Illinois Real Estate Transfer Tax Act.}