

TRUST COMPANY
An affiliate of Marshall & Ilsley Corporation

Trustee's Deed



Doc#: 1029348072 Fee: \$44.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 10/20/2010 03:22 PM Pg: 1 of 5

This Indenture, made September 21, 2010 between North Star Trust Company, an Illinois Corporation, successor trustee to Banco Popular, under the provisions of a deed or deeds in trust, duly recorded and delivered in pursuance of a Trust Agreement dated June 27, 1997 and known as Trust Number 26354, party of the first part, and Douglas Nichele, Married party of the second part.

ADDRESS OF GRANTEE(S): 943 Dunlop Avenue, Forest Park, Illinois 60130

Witnesseth, that said party of the first part, in consideration of the sum of Ten (\$10.00) dollars, and other good and valuable considerations in hand paid, does hereby Convey and Quit Claim unto said party of the second part, the following described real estate, situated in Cook County, Illinois, to wit:

Lot Ninety-One (91) in Volk Brothers First Addition to Chicago Home Gardens in the South East Quarter (S.E. ¼) of Section Twenty-Six (26), Township Forty (40) North, Range Twelve (12), East of the Third Principal Meridian, in Cook County, Illinois.

Permanent Index Number: 12-26-410-017-0000

Together with the tenements and appurtenances thereunto belonging.

To Have and to Hold the same unto said party of the second part, and to proper use, benefit and behoof forever of said party of the second part.

This deed is executed by the party of the first part, as Trustee, as aforesaid, pursuant to and in the exercise of the power and authority granted to and vested in it by the terms of said Deed or Deeds in Trust and the provisions of said Trust Agreement above mentioned, and of every other power and authority thereunto enabling.

In Witness Whereof, said part of the first part has caused its corporate seal to be hereto affixed, and has caused its name to be signed to these presents by its Trust Officer and attested by its Trust Officer, the day and year first above written.



NORTH STAR TRUST COMPANY
As Trustee, as aforesaid,

By: [Signature]
Trust Officer

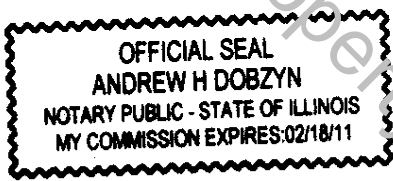
Attest: [Signature]
Trust Officer

UNOFFICIAL COPY

STATE OF ILLINOIS
SS.
COUNTY OF COOK

I, the undersigned, a Notary Public in and for said County, in the State aforesaid do hereby certify that Juanita Chandler, Trust Officer, and Laurel Thorpe, Trust Officer personally known to me to be the same persons whose names are subscribed to the foregoing instrument as such Trust Officers, respectively appeared before me this day in person and acknowledged that they signed and sealed and delivered the said instrument as their own free and voluntary act of said Company for uses and purposes therein set forth; and the said Trust Officer did also then and there acknowledge that said Trust Officer as custodian of the corporate seal of said Company did affix the said corporate seal of said Company for the uses and purposes therein set forth.

Given under my hand and notarial seal September 21, 2010.



Andrew H Dobzyn

Notary Public

Exempt under provisions of Paragraph E, Section 4, Illinois Real Estate Transfer Tax Act.

9/21/10
Date

Juanita Chandler
Grantor or Representative

MAIL TO:

DOUGLAS NICHELE
943 DUNLOP AVENUE
FOREST PARK ILLINOIS 60130

ADDRESS OF PROPERTY

2611 MARWOOD STREET
RIVER GROVE ILLINOIS 60171

THIS INSTRUMENT PREPARED BY:

JUANITA CHANDLER
NORTH STAR TRUST COMPANY
500 W. MADISON ST., SUITE 3150
CHICAGO, ILLINOIS 60661

UNOFFICIAL COPY

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENTS. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 45/3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART (SEE THE BACK OF THIS FORM). THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.)

POWER OF ATTORNEY made this 6th day of June, 2007.

1. I, PHYLLIS L. NICHELE, of 2611 Marwood Street, River Grove, Illinois 60171-1753, hereby appoint: DOUGLAS D. NICHELE, of 943 Dunlop Avenue, Forest Park, Illinois 60130-2242, as my attorney-in-fact (my "agent") to act for me and in my name (in any way I could act in person) with respect to the following powers, as defined in Section 45/3-4 of the "Statutory Short Form Power of Attorney for Property Law" (including all amendments), but subject to any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below:

(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES OF POWERS YOU DO NOT WANT YOUR AGENT TO HAVE. FAILURE TO STRIKE THE TITLE OF ANY CATEGORY WILL CAUSE THE POWERS DESCRIBED IN THAT CATEGORY TO BE GRANTED TO THE AGENT. TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)

- (a) Real estate transactions.
- (b) Financial institution transactions.
- (c) Stock and bond transactions.
- (d) Tangible personal property transactions.
- (e) Safe deposit box transactions.
- (f) Insurance and annuity transactions.
- (g) Retirement plan transactions.
- (h) Social Security, employment and military service benefits.
- (i) Tax matters.
- (j) Claims and litigation.
- (k) Commodity and option transactions.
- (l) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property powers and transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

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**CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH**

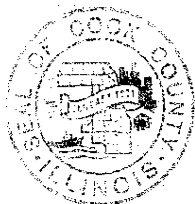
STATE FILE NUMBER 2010 0048323

DATE ISSUED 07/07/2010

DECEDENT'S LEGAL NAME PHYLLIS L NICHELE			SEX FEMALE	DATE OF DEATH JULY 06, 2010	
COUNTY OF DEATH COOK		AGE AT LAST BIRTHDAY 90 YEARS	DATE OF BIRTH FEBRUARY 23, 1920		
CITY OR TOWN NORTHLAKE		HOSPITAL OR OTHER INSTITUTION NAME VILLA SCALABRINI NSG & REHAB			
PLACE OF DEATH NURSING HOME / LONG TERM CARE FACILITY					
BIRTHPLACE UNAVAILABLE, NE		SOCIAL SECURITY NUMBER ■■■■■0005	MARITAL STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE'S NAME EVER IN U.S. ARMED FORCES? NO	
RESIDENCE 2611 MARWOOD STREET			APT. NO.	CITY OR TOWN RIVER GROVE	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE L	ZIP CODE 60171	FATHER'S NAME BENJAMIN RAIL		MOTHER'S NAME PRIOR TO FIRST MARRIAGE VIVIAN ERICKSON
INFORMANT'S NAME DOUG NICHELE		RELATIONSHIP GRANDSON		MAILING ADDRESS 943 DUNLOP AVENUE, FOREST PARK, IL, 60130	
METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION MOUNT EMBLEM CEMETERY		LOCATION - CITY OR TOWN AND STATE ELMHURST, IL	DATE OF DISPOSITION JULY 08, 2010
FUNERAL HOME THE ELMS FUNERAL HOME, 7600 WEST GRAND AVENUE, ELMWOOD PARK, IL, 60707					
FUNERAL DIRECTOR'S NAME KAREN CHISTENSEN				FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034014516	
LOCAL REGISTRAR'S NAME WILLIAM J DAUGHERTY JR				DATE FILED WITH LOCAL REGISTRAR JULY 7, 2010	
CAUSE OF DEATH PART I. CONGESTIVE HEART FAILURE					
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. _____ Due to (or as a consequence of):			UNKNOWN
		b. FAILURE TO THRIVE Due to (or as a consequence of):			UNKNOWN
		c. _____ Due to (or as a consequence of):			
PART II. Enter other <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I.					WAS AN AUTOPSY PERFORMED? NO
					WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A
DID TOBACCO USE CONTRIBUTE TO DEATH?		FEMALE PREGNANCY STATUS		MANNER OF DEATH	
NO		NOT APPLICABLE		NATURAL	
DATE OF INJURY		TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?
LOCATION OF INJURY					
DESCRIBE HOW INJURY OCCURRED:					IF TRANS OR ATION INJURY, SPECIFY:
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?		DATE PRONOUNCED	TIME OF DEATH
NO	UNKNOWN	NO			04:25 AM
CERTIFIER PHYSICIAN				DATE CERTIFIED JULY 06, 2010	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH DR RAMON PLY, 1835 BROADWAY AVENUE, MELROSE PARK, ILLINOIS, 60440				PHYSICIAN'S LICENSE NUMBER 036-074436	

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

David Orr
David Orr
Cook County Clerk



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

UNOFFICIAL COPY

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 _____

Signature [Signature]
Grantor or Agent

SUBSCRIBED AND SWORN TO BEFORE
ME BY THE SAID _____
THIS _____ DAY OF _____

DONE AT CUSTOMER'S REQUEST

NOTARY PUBLIC _____

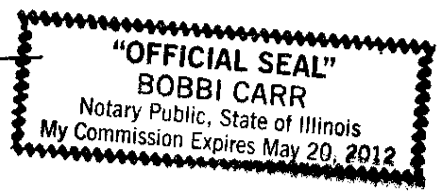
The grantee or his agent affirms and verifies that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, 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 10/20/2001

Signature [Signature]
Grantee or Agent

SUBSCRIBED AND SWORN TO BEFORE
ME BY THE SAID Douglas D. Nichol
THIS 20th DAY OF October 2010

NOTARY PUBLIC [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.]