

Instrument Prepared by:

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Doc#: 1100757145 Fee: \$40.00
Eugene "Gene" Moore RHSP Fee: \$10.00
Cook County Recorder of Deeds
Date: 01/07/2011 01:21 PM Pg: 1 of 3

Deceased Joint Tenancy Affidavit

being duly sworn states that Lillian Micheaux resides at 4614 S. LAWLER
in the City of Chicago IL

That _____ was acquainted with Ruben Micheaux deceased who, at the time of
death, was one of the owners of the land in COOK County, Illinois, described as:

ATTACH LEGAL DESCRIPTION

That the deceased died NOVEMBER 6, 2010, as evidenced by a certified copy of
death certificate of the deceased attached hereto.

That the deceased died:

- Leaving no Last Will & Testament.
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of Probate Division of the Circuit Court of _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____

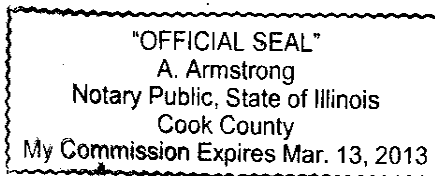
That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of _____ dollars.

Affiant makes this affidavit for the purpose of transferring title for the above described real property from the deceased joint owner to the surviving joint tenant(s).

Subscribed and sworn to before me by the said

Lillian Micheaux

this 7th day of January, A.D. 19 2010



[Signature]
Notary Public

Lillian Micheaux
(Affiant's Signature)

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GEORGE E. COLE
LEGAL FORMS

FORM NO. 206
February, 1985

TRUST DEED (ILLINOIS)
For Use With Note Form 1448
(Monthly Payments Including Interest)

8 9 2 2 3 3 3 4

11-26857-3
#743

CAUTION: Consult a lawyer before using or acting under this form. Neither the publisher nor the seller of this form makes any warranty with respect thereto, including any warranty of merchantability or fitness for a particular purpose.

THIS INDENTURE, made May 17 19 89,

between RUBEN MICHEAUX AND LILLIAN MICHEAUX,
his wife

4614 South Lawler, Chicago, IL 60638
(NO. AND STREET) (CITY) (STATE)

herein referred to as "Mortgagors," and ASHLAND STATE BANK
9443 South Ashland Avenue

Chicago, Illinois 60620
(NO. AND STREET) (CITY) (STATE)

herein referred to as "Trustee," witnesseth: That Whereas Mortgagors are justly indebted to the legal holder of a principal promissory note, termed "Installment Note," of even date herewith, executed by Mortgagors, made payable to Bank and delivered, in and by which note Mortgagors promise to pay the principal sum of TWENTY THOUSAND TWENTY AND 80/100

Dollars, and interest from May 17, 1989 on the balance of principal remaining from time to time unpaid at the rate of 13.00 per cent per annum, such principal sum and interest to be payable in installments as follows: THREE HUNDRED SIXTY-FOUR AND 22/100 Dollars on the 20th day of June, 1989, and THREE HUNDRED SIXTY-FOUR AND 22/100 Dollars on the 20th day of each and every month thereafter until said note is fully paid, except that the final payment of principal and interest, if not sooner paid, shall be due on the 20th day of May, 1996.

Such payments on account of the indebtedness evidenced by said note to be applied first to accrued and unpaid interest on the unpaid principal balance and the remainder to principal; the portion of each of said installments constituting principal, to the extent not paid when due, to bear interest after the date for payment thereof, at the rate of 16.00 per cent per annum, and all such payments being made payable at Ashland State Bank, 9443 S. Ashland, Chicago, IL or at such other place as the legal holder of the note may, from time to time, in writing appoint, which note further provides that at the election of the legal holder thereof and without notice, the principal sum remaining unpaid thereon, together with accrued interest thereon, shall become at once due and payable, at the place of payment aforesaid, in case default shall occur in the payment, when due, of any installment of principal or interest in accordance with the terms thereof or in case default shall occur and continue for three days in the performance of any other agreement contained in this Trust Deed (in which event election may be made at any time after the expiration of said three days, without notice), and that all parties thereto severally waive presentment for payment, notice of dishonor, protest and notice of protest.

NOW THEREFORE, to secure the payment of the said principal sum of money and interest in accordance with the terms, provisions and limitations of the above mentioned note and of this Trust Deed, and the performance of the covenants and agreement herein contained, by the Mortgagors to be performed, and also in consideration of the sum of One Dollar in hand paid, the receipt whereof is hereby acknowledged, Mortgagors by these presents CONVEY AND WARRANT unto the Trustee, its or his successors and assigns, the following described Real Estate and all of their estate, right, title and interest therein, situate, lying and being in the city of Chicago, COUNTY OF Cook AND STATE OF ILLINOIS, to wit:

LOT 4 IN BLOCK 26 IN FREDERICK H. BARTLETT'S CENTRAL CHICAGO, A SUBDIVISION IN THE SOUTHEAST 1/4 OF SECTION 4 AND THE NORTHEAST 1/4 AND THE SOUTHEAST 1/4 OF SECTION 9, TOWNSHIP 38 NORTH, RANGE 13, LYING EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

which, with the property hereinafter described, is referred to herein as the "premises,"

Permanent Real Estate Index Number(s): 19-04-426-018

Address(es) of Real Estate: 4614 South Lawler Chicago, Illinois 60638

TOGETHER with all improvements, tenements, easements, and appurtenances thereto belonging, and all rents, issues and profits thereof for so long and during all such times as Mortgagors may be entitled thereto (which rents, issues and profits are pledged primarily and on a parity with said real estate and not secondarily), and all fixtures, apparatus, equipment or articles now or hereafter therein or thereon used to supply heat, gas, water, light, power, refrigeration and air conditioning (whether single units or centrally controlled), and ventilation, including (without restricting the foregoing), screens, window shades, awnings, storm doors and windows, floor coverings, inador beds, stoves and water heaters. All of the foregoing are declared and agreed to be a part of the mortgaged premises whether physically attached thereto or not, and it is agreed that all buildings and additions and all similar or other apparatus, equipment or articles hereafter placed in the premises by Mortgagors or their successors or assigns shall be part of the mortgaged premises.

TO HAVE AND TO HOLD the premises unto the said Trustee, its or his successors and assigns, forever, for the purposes, and upon the uses and trusts 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 Mortgagors do hereby expressly release and waive.

The name of a record owner is: RUBEN MICHEAUX AND LILLIAN MICHEAUX

This Trust Deed consists of two pages. The covenants, conditions and provisions appearing on page 2 (the reverse side of this Trust Deed) are incorporated herein by reference and hereby are made a part hereof the same as though they were here set out in full and shall be binding on Mortgagors, their heirs, successors and assigns.

Witness the hands and seals of Mortgagors, the day and year first above written.

Ruben Micheaux (Seal)
RUBEN MICHEAUX

Lillian Micheaux (Seal)
LILLIAN MICHEAUX

The Above Space For Recorder's Use Only

ASHLAND STATE BANK
#0573 # 1 1-17-89 89225654
COOK COUNTY RECORDER

89225654

UNOFFICIAL COPY

**CHICAGO, ILLINOIS
MEDICAL CERTIFICATE OF DEATH**

STATE FILE NUMBER 2010 0083770

DATE ISSUED 12/03/2010

DECEDENT'S LEGAL NAME RUBEN MICHEAUX		SEX MALE	DATE OF DEATH NOVEMBER 06, 2010	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 76 YEARS	DATE OF BIRTH JANUARY 05, 1934		
CITY OR TOWN BRIDGEVIEW		HOSPITAL OR OTHER INSTITUTION NAME BRIDGEVIEW HEALTH CARE CENTER		
PLACE OF DEATH NURSING HOME / LONG TERM CARE FACILITY				
BIRTHPLACE ATHENS, TX	SOCIAL SECURITY NUMBER [REDACTED]-4017	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME LILLIAN TOBIAS	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 4614 S LAWLER		APT. NO.	CITY OR TOWN CHICAGO	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60638	FATHER'S NAME OSCAR MICHEAUX	MOTHER'S NAME PRIOR TO FIRST MARRIAGE ELLER MAE LEE LAWLER
INFORMANT'S NAME LILLIAN MICHEAUX		RELATIONSHIP WIFE	MAILING ADDRESS 4614 S LAWLER, CHICAGO, IL, 60638	
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION OAK RIDGE CEMETERY	LOCATION - CITY OR TOWN AND STATE HILLSIDE, IL	DATE OF DISPOSITION NOVEMBER 13, 2010	
FUNERAL HOME WALLACE BROADVIEW FUNERAL HOME, 2000 ROOSEVELT ROAD, BROADVIEW, IL, 60155				
FUNERAL DIRECTOR'S NAME VERNON L WALLACE			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034009351	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR NOVEMBER 19, 2010	
CAUSE OF DEATH PART I. MASSIVE CEREBROVASCULAR ACCIDENT				
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a.	YEARS	
		Due to (or as a consequence of):		
		b. CORONARY ARTERY DISEASE	YEARS	
		Due to (or as a consequence of):		
		c. ESSENTIAL HYPERTENSION	YEARS	
		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. HYPERLIPIDEMIA, PARKINSON'S DISEASE			WAS AN AUTOPSY PERFORMED? NO	
DID TOBACCO USE CONTRIBUTE TO DEATH?			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
FEMALE PREGNANCY STATUS NOT APPLICABLE			MANNER OF DEATH NATURAL	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?	
LOCATION OF INJURY			IF TRANSPORTATION INJURY, SPECIFY:	
DESCRIBE HOW INJURY OCCURRED:				
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE OCTOBER 22, 2010	WAS MEDICAL EXAMINER OR CORONER CONTACTED? YES	DATE PRONOUNCED	TIME OF DEATH 10:20 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED NOVEMBER 19, 2010	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH PITU PUNJABI, 6187 W ARCHER STE 102, CHICAGO, ILLINOIS, 60638			PHYSICIAN'S LICENSE NUMBER 036053482	

APPROXIMATE
INTERVAL BETWEEN
ONSET AND DEATH

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