

# UNOFFICIAL COPY



## QUIT CLAIM DEED Statutory (ILLINOIS)

Doc#: 1402856000 Fee: \$44.00  
RHSP Fee: \$9.00 RPRF Fee: \$1.00  
Affidavit Fee: \$2.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 01/28/2014 07:32 AM Pg: 1 of 4

THE GRANTOR, **JAY KIT SILVER**, a widower,\* whose address is 3009 Margo Lane, Northbrook, IL 60062, for and in consideration of the sum of TEN AND NO/100 (\$10.00) DOLLARS, and other good and valuable consideration in hand paid, CONVEYS and QUIT CLAIMS to

the GRANTEE, **THE JAY KIT SILVER REVOCABLE TRUST DATED JANUARY 20, 2014, JAY KIT SILVER AS TRUSTEE**, whose address is 3009 Margo Lane, Northbrook, IL 60062, the following described real estate, situated in the Village of Northbrook, County of Cook, State of Illinois, to-wit:

LOT 26 IN TALL OAKS UNIT TWO, BEING A SUBDIVISION OF PART OF THE SOUTH HALF OF THE SOUTH HALF OF THE SOUTHEAST QUARTER OF SECTION 17, TOWNSHIP 42 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, AS PER PLAT OF SUBDIVISION RECORDED JULY 24, 1971, AS DOCUMENT NO. 21523142, IN COOK COUNTY, ILLINOIS.

The Grantor hereby releases and waives all rights under and by virtue of the homestead exemption laws of the State of Illinois.

\*Cary Silver died on September 13, 2013 (see attached copy of death certificate of Cary Silver). Immediately upon the death of Cary Silver, Jay Kit Silver acquired title to this real estate by right of survivorship. Jay Kit Silver now transfers this real estate to his Revocable Trust.

\* Note that "Jay Kit Silver" and "J. Kit Silver" are one and the same person.

Permanent Index No.: 04-17-402-057-0000, 04-17-402-025-0000  
Property Address: 3009 Margo Lane, Northbrook, IL 60062

Dated this 20<sup>th</sup> day of JANUARY, 2014

Jay Kit Silver  
JAY KIT SILVER

Exempt under the provisions of Section 4, Paragraph e. of the State of Illinois Real Estate Transfer Tax Act.

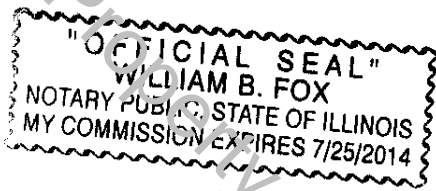
By: J. Kit Silver  
Dated: JANUARY 20, 2014

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STATE OF ILLINOIS )  
 ) SS.  
COUNTY OF LAKE )

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that **Jay Kit Silver**, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he signed, sealed and delivered the said instrument as his free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

Given under my hand and official seal this 20 day of January, 2014.



William B. Fox  
Notary Public

This instrument was prepared by,  
and after recording mail to:

William B. Fox, Esq.  
Lyon & Caron LLP  
790 Estate Drive, Suite 180  
Deerfield, Illinois 60015

Send subsequent tax bills to:

Jay Kit Silver  
3009 Margo Lane  
Northbrook, IL 60062

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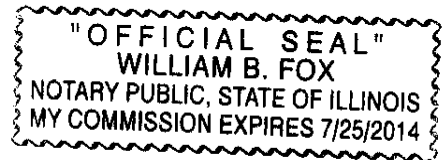
## EXEMPT AND ABI TRANSFER DECLARATION STATEMENT REQUIRED UNDER PUBLIC ACT 87-543 COOK COUNTY ONLY

The GRANTOR or their agent affirm that, to the best of their knowledge, the name of the grantee shown on the deed or assignment of beneficial interest in a land trust are either natural persons, 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: JANUARY 20, 2014

Signature: Jay Kit Silver  
Grantor or Agent

Subscribed and sworn to before me by the said agent, this 20 day of January, 2014



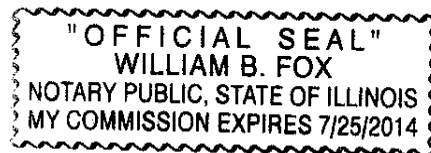
Notary Public William B. Fox

The GRANTEE or their agent affirm and verify that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust are either natural persons, 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.

Dated: JANUARY 20, 2014

Signature: Jay Kit Silver  
Grantee or Agent

Subscribed and sworn to before me by the said agent, this 20 day of January, 2014



Notary Public William B. Fox

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

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.

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STATE OF FLORIDA

OFFICE of VITAL STATISTICS

CERTIFICATION OF DEATH

STATE FILE NUMBER: 2013128597

DATE ISSUED: September 23, 2013

DECEDENT INFORMATION

STATE FILE DATE: September 23, 2013

NAME: CARY MARILYN SILVER

DATE OF DEATH: FOUND ON September 13, 2013 SEX: FEMALE SSN: [REDACTED] AGE: 054 YEARS

DATE OF BIRTH: May 14, 1959 BIRTHPLACE: OXFORD, OHIO, UNITED STATES

PLACE OF DEATH: TEMPORARY RESIDENCE

FACILITY NAME OR STREET ADDRESS: 3925 FOREST GLEN BOULEVARD, APARTMENT 202

LOCATION OF DEATH: NAPLES, COLLIER COUNTY

SURVIVING SPOUSE, DECEDENT'S RESIDENCE AND HISTORY INFORMATION

MARITAL STATUS: MARRIED

SPOUSE: JAY KIT SILVER

RESIDENCE: 3009 MARGO LANE, NORTHBROOK, ILLINOIS 60062, UNITED STATES

COUNTY: COOK

OCCUPATION, INDUSTRY: EDITOR, MAGAZINE

RACE: [X] White [ ] Black or African American [ ] Asian Indian [ ] Chinese [ ] Filipino [ ] Native Hawaiian [ ] Japanese [ ] Korean

[ ] American Indian or Alaskan Native-Tribe: [ ] Vietnamese [ ] Other Asian:

[ ] Guamanian or Chamorro [ ] Samoan [ ] Other Pacific Is: [ ] Other: [ ] Unknown

HISPANIC OR HAITIAN ORIGIN? NO, NOT OF HISPANIC/HAITIAN ORIGIN

EDUCATION: MASTERS DEGREE (E.G., MA, MS..) EVER IN U.S. ARMED FORCES? NO

PARENTS AND INFORMANT INFORMATION

FATHER: WILLIAM C MARGACH

MOTHER: SUSAN G GRIGSBY

INFORMANT: JAY KIT SILVER

RELATIONSHIP TO DECEDENT: HUSBAND

INFORMANT'S ADDRESS: 3009 MARGO LANE, NORTHBROOK, ILLINOIS 60062, UNITED STATES

PLACE OF DISPOSITION AND FUNERAL FACILITY INFORMATION

PLACE OF DISPOSITION: GULF COAST CREMATION SERVICES

NAPLES, FLORIDA

METHOD OF DISPOSITION: CREMATION

FUNERAL DIRECTOR LICENSE NUMBER: RACHEL M. SCHAD, F029812

FUNERAL FACILITY: FULLER FUNERAL HOME-CREMATION SVC- PINE RIDGE F060694

1625 PINE RIDGE RD, NAPLES, FLORIDA 34109

CERTIFIER INFORMATION

TYPE OF CERTIFIER: MEDICAL EXAMINER

MEDICAL EXAMINER CASE NUMBER: 201300347

TIME OF DEATH (24 hr): 1159

CERTIFIER'S NAME: MANFRED CLARK BORGES JR

CERTIFIER'S LICENSE NUMBER: ME64465

NAME OF ATTENDING PHYSICIAN (if other than Certifier): NOT APPLICABLE

CAUSE OF DEATH AND INJURY INFORMATION

PROBABLE MANNER OF DEATH: NATURAL

CAUSE OF DEATH - PART I - and Approximate Interval: Onset to Death:

a METASTATIC BREAST CANCER

b

c

d

PART II - Other significant conditions contributing to death but not resulting in the underlying cause given in PART I:

AUTOPSY PERFORMED? NO

AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH?

DATE OF SURGERY:

DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN

REASON FOR SURGERY:

IF FEMALE, WAS SHE PREGNANT WITHIN THE PAST YEAR? NO

NOT PREGNANT WITHIN PAST YEAR

DATE OF INJURY: NOT APPLICABLE

TIME OF INJURY (24 hr):

INJURY AT WORK?

LOCATION OF INJURY:

DESCRIBE HOW INJURY OCCURRED:

PLACE OF INJURY:

IF TRANSPORTATION INJURY, Status of Decedent:

Type of Vehicle:

[Signature]

State Registrar

REQ: 2014207661

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE.

WARNING: THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH WATERMARKS OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARKS. THE DOCUMENT FACE CONTAINS A MULTICOLORED BACKGROUND, GOLD EMBOSSED SEAL, AND THERMOCHROMIC FL. THE BACK CONTAINS SPECIAL LINES WITH TEXT. THIS DOCUMENT WILL NOT PRODUCE A COLOR COPY.



\* 5 2 9 7 A 3 L 7 \*

DH FORM 1947 (11/11)

CERTIFICATION OF VITAL RECORD

FLORIDA DEPARTMENT OF HEALTH