

UNOFFICIAL COPY

Doc#: 2116206017 Fee: \$98.00
Karen A. Yarbrough
Cook County Clerk
Date: 06/11/2021 05:33 AM Pg: 1 of 6

PT21-7357SA00
QUIT CLAIM DEED IN TRUST
ILLINOIS STATUTORY

Dec ID 20210501641194
ST/CO Stamp 1-577-941-264

Mail to:

Sidney M. Levine
Williams Bax & Saltzman PC
221 N. LaSalle Street, Suite 3700
Chicago, IL 60601

Name and address of taxpayer:

Linda Copeland Trust
Linda J. Copeland, Trustee
4527 Deer Trail
Northbrook, IL 60062

[RECORDER'S STAMP]

The grantor, LINDA J. COPELAND, surviving joint tenant upon the death of her husband, Don R. Copeland, a copy of whose death certificate is attached hereto as Exhibit A, a widow not since remarried, of the City of Northbrook, County of Cook, State of Illinois for and in consideration of Ten Dollars (\$10.00) and other good and valuable consideration in hand paid, conveys and quitclaims to LINDA J. COPELAND, as Trustee of the Linda Copeland Trust dated June 19, 2006, 4527 Deer Trail, Northbrook, IL 60062, all her interest in the following described real estate situated in the County of Cook in the State of Illinois, to wit:

SEE EXHIBIT A FOR LEGAL DESCRIPTION.

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

Permanent Index Numbers: 03-01-208-075-0000

Property Address: 4527 Deer Trail, Northbrook, IL 60062

Dated this 14th day of May 2021.



LINDA J. COPELAND (SEAL)

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State of Illinois
County of Cook

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, do hereby certify that LINDA J. COPELAND, 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 she signed, sealed and delivered the instrument as her free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and notarial seal, this 14th day of May, 2021.



Emilie Rebecca Caulfield
Notary Public

My commission expires on May 4, 2024.

This instrument was prepared by:

Sidney M. Levine
Williams Bax & Saltzman PC
221 N. LaSalle Street, Suite 3700
Chicago, IL 60601

Exempt under provisions of paragraph E, Section 4, Illinois Real Estate Transfer Act

Date: May 14, 2021

[Signature]

Signature of Buyer, Seller or Representative

This conveyance must contain the name and address of the Grantee for tax billing purposes: (55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (55 ILCS 5/3-5022).

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EXHIBIT A

Property Description

Parcel 1: The East 36.15 feet of the West 113.12 feet of Lot 12 in Winchester Lane North Subdivision, being a subdivision in the Northeast Quarter of Section 1 Township 42 North, Range 11, East of the Third Principal Meridian, in Cook County, Illinois, according to the Plat of Subdivision recorded November 10, 1988 as Document 88522636.

Parcel 2: Easement for ingress and egress for benefit of Parcel 1 as set forth in the Winchester Lane North Declaration of Party Wall Rights, Covenants, Conditions, Restrictions and Easements recorded December 22, 1988 as Document 88589852 in Cook County, Illinois.

Property of Cook County Clerk's Office

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COOK COUNTY CLERK VITAL RECORDS
CHICAGO, ILLINOIS
MEDICAL EXAMINER/CORONER CERTIFICATE OF DEATH

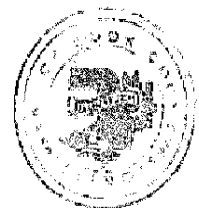
STATE FILE NUMBER 2020 0107688 MEDICAL EXAMINER'S CASE NUMBER ME2020-12963 DATE ISSUED 11/24/2020

DECEDENT'S LEGAL NAME DON R COPELAND		SEX MALE	DATE OF DEATH NOVEMBER 19, 2020	
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 89 YEARS	DATE OF BIRTH FEBRUARY 04, 1931		
CITY OR TOWN GLENVIEW	HOSPITAL OR OTHER INSTITUTION NAME GLENBROOK HOSPITAL			
PLACE OF DEATH INPATIENT				
BIRTHPLACE CHICAGO, IL	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME LINDA FARBER	EVER IN U.S. ARMED FORCES? YES
RESIDENCE 4527 DEER TRAIL	APT. NO.	CITY OR TOWN NORTHBROOK	INSIDE CITY LIMITS? YES	
COUNTY COOK	STATE IL	ZIP CODE 60062	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION HARVEY COPELAND	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION LILYAN RUBIN
INFORMANT'S NAME LINDA J COPELAND	RELATIONSHIP WIFE	MAILING ADDRESS 4527 DEER TRAIL, NORTHBROOK, IL, 60062		
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION MEMORIAL PARK CEMETERY	LOCATION - CITY OR TOWN AND STATE SKOKIE, IL	DATE OF DISPOSITION NOVEMBER 22, 2020	
FUNERAL HOME CHICAGO JEWISH FUNERALS, 8851 NORTH SKOKIE BOULEVARD, SKOKIE, IL, 60077				
FUNERAL DIRECTOR'S NAME DAVID J JACOBSON		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034012372		
LOCAL REGISTRAR'S NAME KAREN A YARBROUGH		DATE FILED WITH LOCAL REGISTRAR NOVEMBER 20, 2020		
CAUSE OF DEATH PART I	NOVEL CORONA (COVID-19) VIRAL INFECTION			
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a.	Due to (or as a consequence of)		
	b.	Due to (or as a consequence of)		
	c.	Due to (or as a consequence of)		
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I. RECENT SUBDURAL HEMORRHAGE DUE TO FALL, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, ATRIAL FIBRILLATION, HYPERTENSIVE ARTERIOSCLEROTIC CARDIOVASCULAR DISEASE				
FEMALE PREGNANCY STATUS NOT APPLICABLE		WAS AN AUTOPSY PERFORMED? NO		
		WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A		
		MANNER OF DEATH NATURAL		
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?	
LOCATION OF INJURY				
DESCRIBE HOW INJURY OCCURRED.			IF TRANSPORTATION INJURY, SPECIFY	
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PRONOUNCED NOVEMBER 19, 2020	TIME OF DEATH 01:45 PM
CERTIFIER MEDICAL EXAMINER/CORONER			DATE CERTIFIED NOVEMBER 20, 2020	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH PONNI ARUNKUMAR MD, 2121 W HARRISON ST. CHICAGO, IL, 60612			PHYSICIAN'S LICENSE NUMBER 1566574	



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

Karen A. Yarbrough
Karen A. Yarbrough
Cook County Clerk



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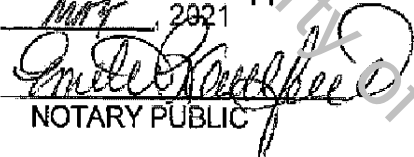
STATEMENT BY GRANTOR AND GRANTEE

The grantor or her agent affirms that, to the best of her knowledge, the name of the grantor 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, 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 Mar 14, 2021

Signature: 
Grantor or Agent

SUBSCRIBED AND SWORN TO
BEFORE ME THIS 14th DAY OF
Mar, 2021


NOTARY PUBLIC



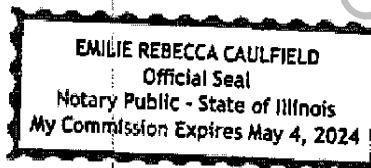
The grantee or her agent affirms and verifies that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois,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

Dated Mar 14, 2021

Signature: 
Grantee or Agent

SUBSCRIBED AND SWORN TO
BEFORE ME THIS 14th
DAY OF Mar, 2021


NOTARY PUBLIC



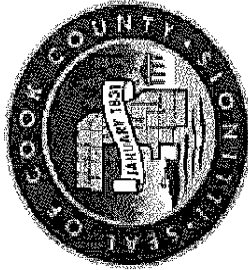
NOTE: Any person who knowingly submits a false statement concerning the identity of a grantee shall be guilty of a Class C misdemeanor for the first offense and of a Class A misdemeanor for subsequent offenses.

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

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REAL ESTATE TRANSFER TAX

07-Jun-2021



COUNTY:
ILLINOIS:
TOTAL:

0.00
0.00
0.00

03-01-208-075-0000

20210501641194

1-577-941-264

Property of Cook County Clerk's Office