



UNOFFICIAL COPY

Southwest
Financial Bank and Trust Company

9-1075872

WARRANTY DEED IN TRUST

DEED 11
140013 GRAN 2029 01/24/94 12:58:00 \$29.50
#3900 * 94-075872
COOK COUNTY RECORDER

This Indenture Witnesseth, That the Grantor STANLEY BOHYCZ, a bachelor

of the County of Cook and the State of Illinois for and in consideration of Ten and no/100 Dollars,

and other good and valuable consideration in hand paid, Convey and Warrant unto Southwest Financial Bank and Trust Company, an Illinois banking corporation its successor or successors as Trustee under the provisions of a trust agreement dated the 29th day of September 1992 known as Trust Number 1-0600, the following described real estate in the County of Cook and State of Illinois, to-wit:

LOT 1, LOT 2, AND LOT 3 IN BLOCK 25 IN WEST PULLMAN, A SUBDIVISION OF THE NORTHWEST QUARTER AND THE WEST HALF OF THE NORTHEAST QUARTER OF SECTION 28, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN.

"Exempt under provision of Paragraph E, Section 4, Real Estate Transfer Tax Act."

12/27/93
Date

Stanley Bohycz
Buyer/Seller Representative

94075872

Property Address: 12104 Westworth Avenue, Chicago, IL 60628

Permanent Real Estate Index No. 25-28-219-021-0000

To have and to hold the said premises with the appurtenances, upon the trusts and for uses and purposes herein and in said trust agreement set forth.

Full power and authority is hereby granted to said trustee to improve, manage, protect and subdivide said premises or any part thereof, to dedicate parks, streets, highways or alleys and to vacate any subdivision or part thereof, and to resubdivide said property as often as desired, to contract to sell, to grant options to purchase, to sell on any terms, to convey, either with or without consideration, to convey said premises or any part thereof to a successor or successors in trust and to grant to such successor or successors in trust all of the title, estate, powers and authorities vested in said trustee, to donate, to dedicate, to mortgage, pledge or otherwise encumber, said property, or any part thereof, to lease said property or any part thereof, from time to time, in possession or reversion, by leases to commence in present or in future, and upon any terms and for any period or periods of time, not exceeding in the case of any single demise the term of 99 years, and to renew or extend leases upon any terms and for any period or periods of time and to amend, change or modify leases and the terms and provisions thereof at any time or times hereafter, to contract to make leases and to grant options to lease and options to renew leases and options to purchase the whole or any part of the reversion and to contract respecting the manner of fixing the amount of present or future rentals, to partition or to exchange said property, or any part thereof, for other real or personal property, to grant easements or charges of any kind, to release, convey or assign any right, title or interest in or about or easement appurtenant to said premises or any part thereof, and to deal with said property and every part thereof in all other ways and for such other considerations as it would be lawful for any person owning the same to deal with the same, whether similar to or different from the ways above specified, at any time or times hereafter.

In no case shall any party dealing with said trustee in relation to said premises, or to whom said premises or any part thereof shall be conveyed, contracted to be sold, leased or mortgaged by said trustee, be obliged to see to the application of any purchase money, rent, or money borrowed or advanced on said premises, or be obliged to see that the terms of this trust have been complied with, or be obliged to inquire into the necessity or expediency of any act of said trustee, or be obliged or privileged to inquire into any of the terms of said trust agreement; and every deed, trust deed, mortgage, lease or other instrument executed by said trustee in relation to said real estate shall be conclusive evidence in favor of every person relying upon or claiming under any such conveyance, lease or other instrument, (a) that at the time of the delivery thereof the trust created by this Indenture and by said trust agreement was in full force and effect, (b) that such conveyance or other instrument was executed in accordance with the trusts, conditions and limitations contained in this Indenture and in said trust agreement or in some amendment thereof and binding upon all beneficiaries thereunder, (c) that said trustee was duly authorized and empowered to execute and deliver every such deed, trust deed, lease, mortgage or other instrument, and (d) if the conveyance is made to a successor or successors in trust, that such successor or successors in trust have been properly appointed and are fully vested with all the title, estate, rights, powers, authorities, duties and obligations of its, his or their predecessor in trust.

The interest of each and every beneficiary hereunder and of all persons claiming under them or any of them shall be only in the earnings, avails and proceeds arising from the sale or other disposition of said real estate, and such interest is hereby declared to be personal property, and no beneficiary hereunder shall have any title or interest, legal or equitable, in or to said real estate as such, but only an interest in the earnings, avails and proceeds thereof as aforesaid.

If the title to the above lands is now or hereafter registered, the Registrar of Titles is hereby directed not to register or note in the certificate of title or duplicate thereof, or memorial, the words "in trust" or "upon condition," or "with limitations," or words of similar import, in accordance with the salute in such cases made and provided.

And the said grantor hereby expressly waive and release any and all right or benefit under and by virtue of any and all statutes of the State of Illinois, providing for the exemption of homesteads from sale on execution or otherwise.

2952

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In Witness Whereof, the grantor _____ aforesaid ha S hereunto set his hand _____ and seal _____ this 27th day of December, 19 93.

(SEAL) Stanley Borycz _____ (SEAL)
STANLEY BORYCZ

State of Illinois S.S.
County of Cook

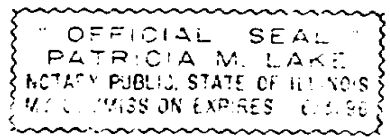
I, _____ the undersigned _____ a Notary Public
in and for said County, in the State aforesaid, do hereby certify that Stanley Borycz
a bachelor

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 acknowledges 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 _____ seal this 27th day of December, A.D. 19 93
Patricia M. Lake
Notary Public



After Recording Mail to: Attn: Trust Department
Southwest Financial Bank and Trust Company
9901 South Western Avenue
Chicago, IL 60643
(312) 773-6000



Prepared By: Pat Lake
9901 S. Western
Chicago, IL 60643

94075572

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THIS CERTIFIED COPY VALID WHEN MULTICOLOR SEAL AND BLUE SIGNATURE ARE AFFIXED

96075872

February 8, 1989.

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

I, **DAVID C. EDWARDS M.D. M.P.A.**, LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS OF THE CITY OF CHICAGO, BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO; THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY AS A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES



MEDICAL EXAMINER'S - CORONER'S
CERTIFICATE OF DEATH

6025333

STATE OF ILLINOIS

REGISTRATION DISTRICT NO. **16.10**
REGISTERED NUMBER

17 February 1989

DECEASED NAME FIRST **Julian** MIDDLE **J.** LAST **Borycz** SEX **Male** DATE OF BIRTH **13 February 1919**

COUNTY OF DEATH **Cook** **CITY TOWN VILLAGE OR ROAD DISTRICT NUMBER** **60** **HOSPITAL OR OTHER INSTITUTION** **Roseland Community Hospital** **DATE OF DEATH** **Feb. 26, 1989**

BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) **Chicago, Ill.** **MARRIED (CHECK ONE)** **Never Married** **AGE LAST BIRTHDAY (YEAR, MONTH, DAY)** **69** **DATE OF BIRTH** **13 February 1919**

SOCIAL SECURITY NUMBER **354-12-5141** **USUAL OCCUPATION** **Inspector** **NAME OF SURVIVING SPOUSE (LAST, FIRST, MIDDLE)** **None** **DATE OF MARRIAGE** **None**

RESIDENCE (STREET AND NUMBER IN CITY, TOWN, VILLAGE OR ROAD DISTRICT NO.) **12137 S. Perry** **CITY, TOWN, VILLAGE OR ROAD DISTRICT NO.** **Chicago** **INSPECTION BY (NAME AND ADDRESS OF PHYSICIAN)** **Dr. Alex Selerovic, Cardiac Vascular Division, 17c 12137 Perry Ave. Chicago, Ill. 60628**

STATE **Illinois** **ZIP CODE** **60628** **RACE (WHITE, BLACK, AMERICAN INDIAN OR ALASKA NATIVE)** **White** **RELIGION** **Catholic** **CITY, TOWN, VILLAGE OR ROAD DISTRICT NO.** **Chicago** **COUNTY** **Cook**

FATHER'S NAME (FIRST, MIDDLE, LAST) **Stamley Borycz Sr.** **MOTHER'S NAME (FIRST, MIDDLE, LAST)** **Sophia Korz**

RELATIONSHIP **Brother** **MAILING ADDRESS (STREET AND NO. CITY, STATE, ZIP)** **17c 12137 Perry Ave. Chicago, Ill. 60628**

18 PART I (For use by medical examiner or coroner only. This section is not to be filled out by the registrars.)

Immediate Cause (final condition or condition leading to death) **(a) Aortic Sclerotic Cardiovascular Disease**

CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (b) DUE TO, OR AS A CONSEQUENCE OF

CAUSE LAST

19 PART II (For use by medical examiner or coroner only. This section is not to be filled out by the registrars.)

NATURAL ACQUIRED INJURIES **DATE OF INJURY (MONTH, DAY, YEAR)** **200** **HOUR** **200** **MINUTE** **200** **HOW INJURY OCCURRED (CHECK ONE)** **100** **110** **120** **130** **140** **150** **160** **170** **180** **190** **200**

200 **DATE** **Feb. 26, 1989** **PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE, PUBLIC PLACE, ETC.)** **200** **LOCATION (CITY, VIL, OR TOWN, DISTRICT NO., AND COUNTY, STATE)** **200** **IF FEMALE, WAS SHE A PREGNANT (MONTH, YEAR, WEEK NUMBER)** **200** **YES** **NO**

21 **CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INFORMATION THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT**

22 **CORONER'S SIGNATURE** **Robert J. Borycz** **DATE** **Feb. 26, 1989** **AT** **9:20 P. M.**

23 **CORONER'S PHYSICIAN'S SIGNATURE** **Dr. Alex Selerovic** **DATE** **Feb. 26, 1989**

24 **BURIAL CREMATION REMOVAL (BY OR BY)** **240** **CEMETERY OR CREMATORIUM NAME** **Justice** **CITY OR TOWN** **Chicago** **STATE** **Illinois** **DATE** **Feb. 10, 1989**

25 **ENCLOSUREMENT** **250** **RESURRECTION MAUSOLEUM** **250** **STREET AND NUMBER OR R/O** **3737 W. 79th St.** **CITY OR TOWN** **Chicago** **STATE** **Illinois** **ZIP CODE** **60652**

26 **FUNERAL HOME** **260** **Funeral Home** **260** **STREET AND NUMBER OR R/O** **3737 W. 79th St.** **CITY OR TOWN** **Chicago** **STATE** **Illinois** **ZIP CODE** **60652**

27 **FUNERAL DIRECTOR'S LICENSE NUMBER** **270** **8633**

28 **LOCAL HEALTH OFFICER'S SIGNATURE** **James C. Edwards, M.D., M.P.A.** **DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)** **FEB 8 1989**

29 **LOCAL HEALTH OFFICER'S SIGNATURE** **James C. Edwards, M.D., M.P.A.** **DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)** **FEB 8 1989**

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AT BLUE ISLAND ILLINOIS.

(DATE)

MAY 15 1992

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD FOR THE DECEDENT NAMED AT ITEM 1 AND THAT THIS RECORD WAS ESTABLISHED AND FILED IN MY OFFICE IN ACCORDANCE WITH THE PROVISIONS OF THE ILLINOIS STATUTES RELATING TO THE REGISTRATION OF BIRTHS, STILLBIRTHS AND DEATHS.

SIGNED

STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH

REGISTERED NUMBER 219

Type or Place of Autopsy See Funeral Director, Hospital or Physician Instructions

PRINTED BY AUTHORITY OF THE STATE OF ILLINOIS

Medical Certificate of Death form with fields for deceased name (Alex Borycz), date of death (May 13, 1992), cause of death (Brain Stem Infarct), and funeral home information (Blake-Lamb Funeral Home).

275927036

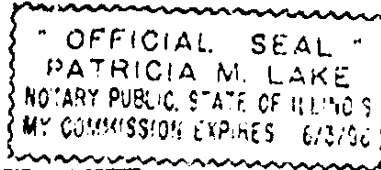
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STATEMENT BY GRANTOR AND GRANTEE

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 1/5, 1994 Signature: Stanley Borycz
Grantor or Agent

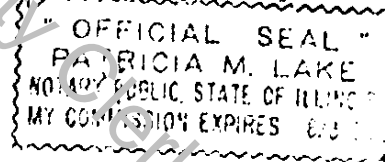
Subscribed and sworn to before me by the said STANLEY BORYCZ this 5th day of JAN. 1994.
Notary Public Patricia M. Lake



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.

Dated 1/5, 1994 Signature: Stanley Borycz
Grantee or Agent

Subscribed and sworn to before me by the said STANLEY BORYCZ this 5th day of JAN. 1994.
Notary Public Patricia M. Lake



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 the provisions of Section 4 of the Illinois Real Estate Transfer Tax Act.)

94070872