

UNOFFICIAL COPY

EXECUTOR/EXECUTRIX DEED

94399407

AT TITLE COMPANY
377 E. Butterfield Rd., Suite 100
Lombard, Illinois 60148

The grantor, JUSTINE PRICE, as Independent Executrix of the estate of BERNEICE GENIS, deceased, by virtue of Letters Testamentary issued to her by the Circuit Court of Cook County, State of Illinois, and in the exercise of the power of sale granted to her and in and by said will and pursuant of every other power and authority her enabling, and in consideration of ONE-HUNDRED and TWENTY THOUSAND and no/100's (\$120,000.00) DOLLARS receipt whereof is hereby acknowledged, does hereby quit claim and convey unto JOEL SANDOVAL and MARIA SANDOBAL, HIS WIFE the following described real estate situated in the County of Cook, State of Illinois, to wit:

LOT 8 IN BLOCK 2 IN TURNER, HULBERT AND MORGAN'S SUBDIVISION OF THE NORTH 5 CHAINS OF LOTS 5 AND 6 AND LOT 4 EXCEPT THE NORTH 33 FEET THEREOF, IN LURTON'S SUBDIVISION OF THAT PART OF THE EAST 1/2 OF THE NORTHWEST 1/4 OF SECTION 1, TOWNSHIP 38 NORTH, RANGE 13, EAST OR THE THIRD PRINCIPAL MERIDIAN, LYING NORTH OF ARCHER ROAD, IN COOK ILLINOIS.

Property address: 2841 W. 40th Street, Chicago, Illinois

Permanent Index No. 19-01-111-008-0000

Subject to: Easements, conditions, restrictions of record and 1933 and subsequent years real estate taxes.

0 1 5 7 7 9

REAL ESTATE TRANSACTION TAX
Cook County
REVENUE STAMP APR 21 1994
\$ 60.00

Dated this, 19 th day of April, 1994

RECORDING
BOX 156

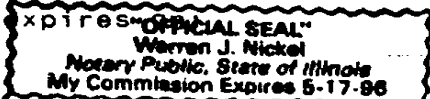
Justine Price
Justine Price, Independent Executrix of the Estate of Berneice Genis, Deceased

STATE OF ILLINOIS)
)
COUNTY OF COOK)

I, WARREN J. NICKEL, the undersigned a Notary in and for said County and State do hereby certify that JUSTINE PRICE Independent Executrix of the estate of BERNEICE GENIS, Deceased, is personally known to me to be the same person whose name is subscribed to the forgoing instrument, appeared before me this day and acknowledged said instrument as her free and voluntary act as such administratrix for the uses and purposes therein set forth.

Given under my hand and official seal, this 19 th day of April 1994.

Commission expires



Notary Public

This deed prepared by: Warren J. Nickel, 15651 So. 94th Ave. Orland Park, Illinois 60462

Mail to: Robert M. Wlaszki
4374 Av Anshon
Chicago, Ill 60632

Subsequent Bills to:

DEPT-11 \$25.00
T#0013 TRAN 3857 05/04/94 12:33:00
#280 * DL * -94-399407
COOK COUNTY RECORDER

250.00

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Property of Cook County Clerk's Office

94399407

942651

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ORIGINAL

LETTERS OF OFFICE- DECEDENT'S ESTATE

(Rev. 4-88) CCP-415

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
County Department, Probate Division

Estate of	BERNICE GENIS	No.	93 P 11121
		Docket	008
		Deceased Page	439

LETTERS OF OFFICE-DECEDENT'S ESTATE

JUSTINE PRICE has been appointed
INDEPENDENT EXECUTOR of the estate of
BERNICE GENIS, deceased,
 who died NOVEMBER 24, 1994 and is authorized to take possession of and collect the estate of
 the decedent and to do all acts required by law.



Witness, JANUARY 6, 1994
AURELIA PUCINSKI
 Clerk of court

CERTIFICATE

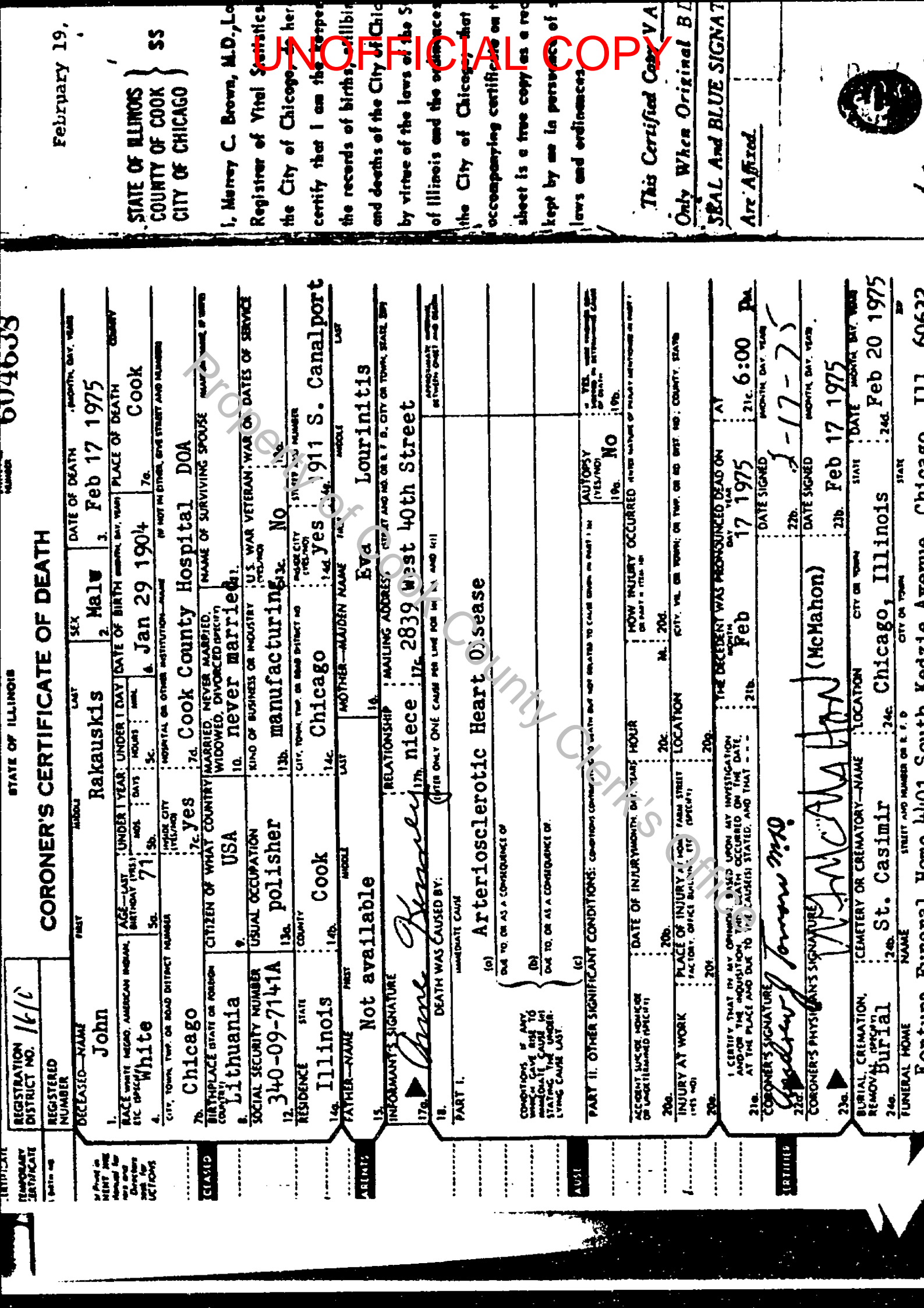
I certify that this is a copy of the letters of office now in force in this estate.

BA

Witness, JANUARY 6, 1994
Aurelia Pucinski
 Clerk of court

93399-107

AURELIA PUCINSKI, CLERK OF THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS



February 19, 1975

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

I, Marrey C. Brown, M.D., Local Registrar of Vital Statistics for the City of Chicago, 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 laws and ordinances.

This Certified Copy is
Only When Original Birth
SEAL AND BLUE SIGNATURE
Are Affixed.



6U4633

CORONER'S CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 16/C
REGISTERED NUMBER

DECEASED—NAME: **John Rakauskis** SEX: **Male** DATE OF DEATH: **Feb 17 1975**

RACE: **White** AGE: **71** UNDER 1 YEAR: **NO** DATE OF BIRTH: **Jan 29 1904** PLACE OF DEATH: **Cook**

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER: **Chicago** HOSPITAL OR OTHER INSTITUTION: **Cook County Hospital DOA**

7a. **Chicago** 7c. **Yes** NAME OF SURVIVING SPOUSE: **None**

8. **Lithuania** 9. **USA** 10. **never married**

11. **340-09-7141A** 12. **polisher** 13a. **Chicago** 13b. **manufacturing** 13c. **No**

14a. **Illinois** 14b. **Cook** 14c. **Chicago** 14d. **1911 S. Canalport**

15. **Not available** 16. **Eva** 17. **Arteriosclerotic Heart Disease**

18. **Arteriosclerotic Heart Disease**

19. **NO** 19a. **NO** 19b. **NO**

20a. **M. 200** 20b. **Feb 17 1975** 20c. **20c** 20d. **20c**

21a. **THE DECEASED WAS PRESUMED DEAD ON** 21b. **Feb 17 1975** 21c. **6:00 PM**

22a. **John J. McMahon (McMahon)** 22b. **Feb 17 1975** 22c. **Feb 17 1975**

23a. **St. Casimir** 23b. **Chicago, Illinois** 23c. **Feb 20 1975**

REGISTRATION DISTRICT NO. 16/C

REGISTERED NUMBER

DECEASED—NAME

SEX

DATE OF DEATH

RACE

AGE

DATE OF BIRTH

PLACE OF DEATH

CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER

HOSPITAL OR OTHER INSTITUTION

NAME OF SURVIVING SPOUSE

CITIZEN OF WHAT COUNTRY

WIDOWED, DIVORCED (SPECIFY)

NEVER MARRIED

KIND OF BUSINESS OR INDUSTRY

U.S. WAR VETERAN

WAR ON DATES OF SERVICE

RESIDENCE

STATE

COUNTY

CITY

STREET AND NUMBER

FATHER—NAME

RELATIONSHIP

MAILING ADDRESS

CITY AND NO. OR R. F. D. CITY OR TOWN, STATE ZIP

DEATH WAS CAUSED BY

IMMEDIATE CAUSE

CONDITIONS OF ANY

WHICH CAUSE ARE TO

BE IMMEDIATE CAUSE IN

STATING THE UNDER-

LIVING CAUSE LAST

PART II: OTHER SIGNIFICANT CONDITIONS

CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN ON PART I

ACCIDENT IN USE OR NUMBER OF UNOCCUPIED SEAT(S)

DATE OF INJURY MONTH, DAY, YEAR HOUR

PLACE OF INJURY AT HOME, FARM STREET, CITY (SPECIFY)

LOCATION

CITY, VIL. OR TOWN; ON TWP. OR RD. DIST. NO.; COUNTY, STATE

THE DECEASED WAS PRESUMED DEAD ON

DATE

DATE SIGNED

MONTH, DAY, YEAR

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

CORONER'S SIGNATURE

CORONER'S PHYSICIAN'S SIGNATURE

CEMETERY OR CREMATORY—NAME

LOCATION

CITY OR TOWN

STATE

DATE

MONTH, DAY, YEAR

BURIAL, CREMATION, REMOVAL, OTHER

Burial

St. Casimir

Chicago, Illinois

Chicago, Illinois

Feb 20 1975

FUNERAL HOME

STREET AND NUMBER OR R. F. D.

CITY OR TOWN, STATE ZIP

FOOTING

Residential Home

4401 South Kedzie Avenue

Chicago

Illinois

60622