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GEORGE E. COLE®
LEGAL FORMS

No. 970
November 1994

TRUSTEE'S DEED (Illinois)

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96655166

THIS AGREEMENT, made this 24th day of April
1996, between Ralph White

/sole
as trustee under Trust Agreement dated 7th day of May
1974, and known as Trust ~~document~~ #B-221

Recited. Grantor, and Rose Kotor and Emma White, Grantee(s).
Co-Trustees under the ROSE KOTOR TRUST,
Dated April 24, 1996

WITNESSES: The Grantor(s) in consideration of the sum of Ten
Dollars (\$10.00) dollars receipt whereof is hereby acknowledged,

and in pursuance of the power and authority vested in the Grantor(s) as said Trustee(s), and of every other power and authority the Grantor(s) hereunto enabling, do(es) hereby convey an quitclaim unto the Grantee(s), in fee simple, the following described real estate, situated in the County of Cook, State of Illinois, to Wit:

Lot 11 in Block 26 in Walter G. McIntosh Company's River Park Addition being a Subdivision of part of fractional Sections 27 and 34, Township 40 North, Range 12, East of the Third Principal Meridian, according to the plat thereof recorded June 15, 1925 in Recorder's Office as document #8944974, in Cook County, Illinois

F	A
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Above Space for Recorder's Use Only

together with the tenements, hereditaments and appurtenances thereunto belonging or in any wise appertaining.

Permanent Real Estate Index Number(s): 27-421-024-0000

Address(es) of real estate: 2418 Maple St., Franklin Park, IL 60131

IN WITNESS WHEREOF, the grantor _____, as trustee _____ as aforesaid, has hereunto set his hand _____ and seal _____ the day and year first above written.

Ralph White (SEAL)
as trustee as aforesaid
Ralph White, sole trustee

PLEASE PRINT OR
TYPE NAME(S) BELOW
SIGNATURE(S)

as trustee as aforesaid (SEAL)

State of Illinois, County of Cook ss. I, the undersigned, a Notary public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that Ralph White, sole trustee under Trust #B-221

IMPRESS
SEAL
HERE

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 as such trustee _____, for the uses and purposes therein set forth.

2750
A

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GEORGE E. COLE
LEGAL FORMS

TRUSTEE'S DEED

As Trustee

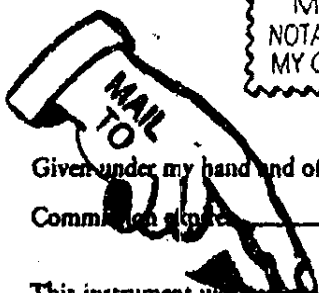
TO

Property of Cook County Recorder's Office

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

"OFFICIAL SEAL"
MARY ANN KOWOLS
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 6/10/98

Mary Ann Kowols 3/20/96



Given under my hand and official seal, this 24th day of April 19 96
Commission expires 6/19 19 98

This instrument was prepared by Hegarty, Kowols & Lynch, 301 W. Touhy, Park Ridge, IL
(Name and Address) 60068

MAIL TO: Hegarty, Kowols & Lynch
(Name)
301 W. Touhy
(Address)
Park Ridge, IL 60068
(City, State and Zip)

SEND SUBSEQUENT TAX BILLS TO: NO CHANGE
Rose Kotor
(Name)
2418 Maple St.
(Address)
Franklin Park, IL 60131
(City, State and Zip)

OR RECORDER'S OFFICE BOX NO. _____

03795336

I, DAVID D. ORR, County Clerk of the County of Cook, in the State aforesaid, and Keeper of the Records and Files of said County, do hereby certify that the attached is a true and correct copy of the original Record on file, all of which appears from the records and files in my office.
IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Seal of the County of Cook, at my office in the City of Chicago, in said County.

David D. Orr
COUNTY CLERK

STATE OF ILLINOIS

STATE FILE NUMBER

MEDICAL CERTIFICATE OF DEATH

84 010602

REGISTRATION DISTRICT NO. 16.0		REGISTERED NUMBER	
DECEASED—NAME		SEX	DATE OF DEATH (MONTH, DAY, YEAR)
1. FRANK JOSEPH JANEZIC ST		2. MALE	3. FEBRUARY 14, 1984
RACE—(WHITE, BLACK, AMERICAN INDIAN, ETC.) (SPECIFY)		ORIGIN OR DESCENT	COUNTY OF DEATH
4. WHITE		5. American	7a. COOK
CITY, TOWN, TWP. OR RD. DISTRICT NUMBER		HOSPITAL OR OTHER INSTITUTION—(NAME, IF NOT IN EITHER, GIVE STREET AND NUMBER)	IF HOSP. OR INST. INDICATED DOA (SPECIFY) 7b. INPATIENT
7c. DES PLAINES		7d. HOLY FAMILY HOSPITAL	
STATE OF BIRTH (IF U.S.A.)		CITIZEN OF WHAT COUNTRY	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)
8. KANSAS		9. U.S.A.	10. MARRIED
SOCIAL SECURITY NUMBER		USUAL OCCUPATION	KIND OF BUSINESS OR INDUSTRY
12. 514-12-1139		11. MECHANIC	12. REFRIGERATION
RESIDENCE STREET AND NUMBER		CITY, TOWN, TWP. OR ROAD DISTRICT NO.	INSIDE CITY (YES/NO)
13a. 610 GREGO COURT		13b. PROSPECT HEIGHTS	13c. YES
FATHER—NAME		MOTHER—(MAIDEN NAME)	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)
14a. JOHN JANEZIC		14b. Katherine Yahler	11. KATHERINE KRACHTUS
MARRIAGE NAME (TYPE OR PRINT)		RELATIONSHIP	MAILING ADDRESS (STREET AND NO. OF CITY OR TOWN, STATE ZIP)
15. KATHERINE JANEZIC		16. WIFE	17. 610 GREGO COURT, PROSPECT HEIGHTS, ILLINOIS 60076
DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
PART I. IMMEDIATE CAUSE			
101. Cardiac Arrest, Cardiogenic Shock			HOURS
102. Probable Primary Ventricular Fibrillation			
103. Congestive Heart Failure			
PART II. OTHER SIGNIFICANT CONDITIONS, CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)			AUTOPSY (YES/NO)
			19a. No
DATE OF OPERATION, IF ANY		MAJOR FINDINGS OF OPERATION	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?
20a.		20b.	20c. YES <input type="checkbox"/> NO <input type="checkbox"/>
18 (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n) (o) (p) (q) (r) (s) (t) (u) (v) (w) (x) (y) (z)		18 (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n) (o) (p) (q) (r) (s) (t) (u) (v) (w) (x) (y) (z)	18 (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n) (o) (p) (q) (r) (s) (t) (u) (v) (w) (x) (y) (z)
21a. Know Patient Only		21b. 2/13/84	21c. 2/14/84 7:55 A.M.
22a. SIGNATURE		22b. 2/14/84	22c. 036 057120
22a. DR. Frank Carter		NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.	
24a. Entombment		24b. All Saints	24c. Des Plaines, Illinois
24d. Feb. 17, 1984		25a. Matz Funeral Home	
25b. Clarence C. Matz		25c. 4310	
26a. REGISTRAR		26b. February 15, 1984	

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EXEMPTED TRANSACTION AFFIDAVIT

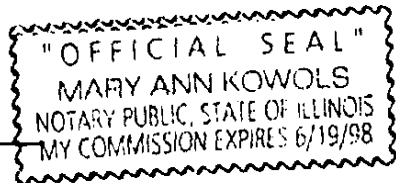
To the best of his/her knowledge, the name of the grantor shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business in or acquire and hold title to real estate in Illinois, a partnership 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.

Mary Ann Kowols
Grantor OR AGENT

Grantor

Signed and Sworn to before
me this 30 day of August, 1996

Mary Ann Kowols
NOTARY PUBLIC



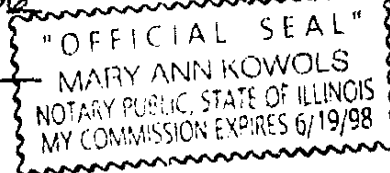
The name of the grantee shown on the deed or assignment of beneficial interest in the land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire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

Mary Ann Kowols
Grantee OR AGENT

Grantee

Signed and Sworn to before
me this 30 day of August, 1996

Mary Ann Kowols
NOTARY PUBLIC



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