

UNOFFICIAL COPY

EXECUTOR'S DEED

THE GRANTORS: MARGARET A. HUGHES of the City of Minneapolis, County of Ramsey, State of Minnesota for and in consideration of TWO HUNDRED TWENTY NINE THOUSAND and --00/100 DOLLARS in hand paid.

97423985

CONVEYS and WARRANTS to:

CHRISTINE C. LARSON

1250 N. Dearborn, Chicago, Illinois the following described Real Estate situated in the County of Cook, in the State of Illinois, to wit:

DEPT-01 RECORDING \$27.50
T#0010 TRAN 8048 06/13/97 13:01:00
#3028 # CJ #-97-423985
COOK COUNTY RECORDER

UNIT 12-C TOGETHER WITH UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, IN THE 1250 NORTH DEARBORN CONDOMINIUM AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AUGUST 31, 1993 AS DOCUMENT NUMBER 93692416 OF THE FOLLOWING DESCRIBED REAL ESTATE: LOT 25 IN BRONSON'S ADDITION TO CHICAGO, BEING A SUBDIVISION IN THE NORTHEAST 1/4 OF SECTION 4, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

97423985

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois. TO HAVE AND TO HOLD said premises forever.

P.I.N. # 17-04-223-086-1049 vol 498

1250 N Dearborn Unit 12C, Chicago, Illinois 60610

DATED this 12th day of February, 1997

Margaret A. Hughes (Seal)
MARGARET A. HUGHES

ATTORNEYS' NATIONAL
TITLE NETWORK, INC.

State of Minnesota
County of Ramsey ss.

I, THOMAS R. HUGHES
(Impress Seal Here)

THOMAS R. HUGHES
NOTARY PUBLIC - MINNESOTA
RAMSEY COUNTY
My Comm. Expires Jan 31, 2001

a Notary Public in and for said County, in the State aforesaid,
DO HEREBY CERTIFY that MARGARET A. HUGHES, 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 said instrument as her free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

12th day of February 1997

Given under my hand and official seal this

Thomas R. Hughes
NOTARY PUBLIC

Commission expires 01-31-2001

Prepared by: Marshall Richter 5225 Old Orchard Road Suite 29, Skokie, Illinois 60077

MAIL TO:

Carol A. DiGiacomo
950 W. Milwaukee STE 201
Glenview, Illinois 60025

Send subsequent tax bill to:
CHRISTINE C. LARSON
1250 N. Dearborn Unit 12C
Chicago, Illinois 60610



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been paid in full and release for the subject property are attached hereto.

11. That the Affiant makes this affidavit to induce Attorney's National Title Network, Inc./ Attorney's Title Insurance Fund, Inc./ Marshall Richter to issue their Title Insurance Policy and Affiant acknowledges Attorney's National Title Network, Inc./ Attorney's Title Insurance Fund, Inc./ Marshall Richter will rely upon the representations made and contained herein in issuing said policy.

12. The following document attached hereto is intended to be incorporated in and be a part of the Affidavit for the purposes stated:

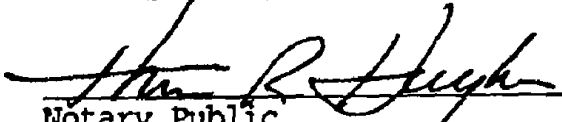
Copy of Death Certificate for MARY C. SYLVESTER.

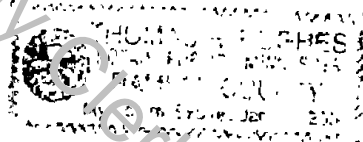
Affiant further states: Naught.

In witness whereof the Affiant has affixed her signature hereto this 11th day of FEBRUARY, 1997


MARGARET A. HUGHES

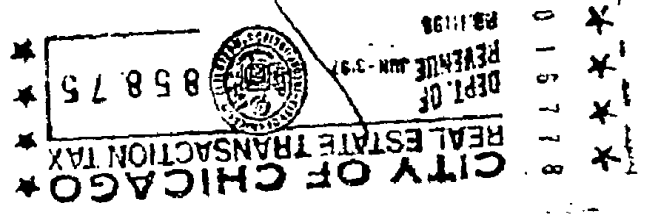
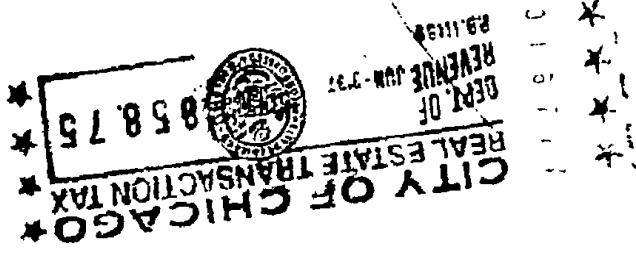
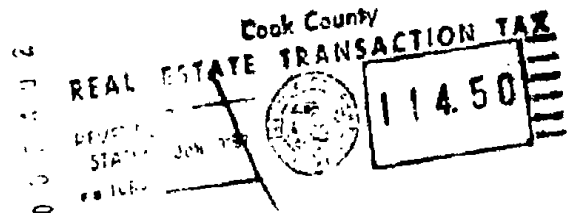
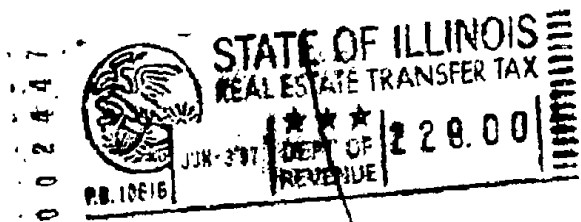
Subscribed and sworn to before me this 11th day of FEBRUARY, 1997


Notary Public



Prepared by:
Marshall Richter, 5225 Old Orchard Road, # 29, Skokie, IL
847-967-5216

97A233085



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Property of Cook County Clerk's Office

REGISTRATION
DATE 16-10
NUMBER 615852

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE REG.
NUMBER
615852

1. COUNTY OF DEATH **COOK** 2. CITY, TOWN, TWP. OR ROAD DISTRICT **CHICAGO**

3. DECEASED **MARY CATHERINE SYLVESTER** 4. SEX **female** 5. DATE OF DEATH **September 15, 1996**

6. AGE - LAST BIRTHDAY **35** 7. UNDER 1 DAY **NO** 8. DATE OF BIRTH **JULY 21, 1961**

9. CHICAGO 10. NORTHWESTERN Memorial Hospital

11. OCCUPATION **SALES** 12. RACE **WHITE** 13. EDUCATION **HIGH SCHOOL**

14. MARRIAGE STATUS **MARRIED** 15. HUSBAND'S NAME **PHILLIP SYLVESTER**

16. RELATIONSHIP TO DECEASED **WIFE** 17. ADDRESS **303 R. Superior Chicago, IL**

18. CITY, TOWN, TWP. OR ROAD DISTRICT NO. **CHICAGO** 19. COUNTY **COOK**

20. STATE **ILLINOIS** 21. ZIP CODE **60610**

22. OCCUPATION **SALES** 23. RACE **WHITE** 24. EDUCATION **HIGH SCHOOL**

25. MARRIAGE STATUS **MARRIED** 26. HUSBAND'S NAME **PHILLIP SYLVESTER**

27. RELATIONSHIP TO DECEASED **WIFE** 28. ADDRESS **303 R. Superior Chicago, IL**

29. CITY, TOWN, TWP. OR ROAD DISTRICT NO. **CHICAGO** 30. COUNTY **COOK**

31. STATE **ILLINOIS** 32. ZIP CODE **60610**

33. CAUSE OF DEATH

34. **End-Stage Renal Disease, Dialysis Dependent**

35. **Hypoglycemic Encephalopathy**

36. **Diabetes Mellitus**

37. **Due to ORA-A consequence of**

38. **Medical**

39. **303 R. Superior Chicago, IL**

40. **CHICAGO**

41. **COOK**

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