

UNOFFICIAL COPY

RELEASE OF MORTGAGE

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0002
RECORDIN #
MAILINGS #
97111369 #
0020 MC#

02/19/97

KNOW ALL MEN BY THESE PRESENTS, that BLANCHE BINDER, individually and as surviving spouse of William Binder, who died a resident of Cook County on January 24, 1996, a copy of his death certificate being attached, of Skokie, Illinois, in consideration of the payment of the sum of Ten Dollars (\$10.00) and other valuable consideration, the receipt whereof is hereby acknowledged, does hereby remise, release, convey and quit claim unto GREGORY BINDER, 1901 Concord Drive, Downers Grove, Illinois, his heirs, legal representatives and assigns, all the right, title, interest, claim or demand whatsoever it may have acquired in, through or by a certain Mortgage, bearing date the 31st day of December, 1988, and registered in the Office of the Registrar of Titles, Cook County, State of Illinois on July 11, 1989 as document number (3808541) to the premises therein described, situated in the County of Cook, State of Illinois, as follows, to wit:

LOTS 29 AND 30 IN BLOCK ONE (1) IN THIRD ADDITION TO "THE BRONX", BEING A SUBDIVISION OF PART OF THE SOUTHEAST QUARTER (1/4) OF SECTION 16, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, REFERENCE BEING HAD TO A PLAT REGISTERED AS DOCUMENT NUMBER 270533. *T.D. # 96 641 800*

Commonly Known As: 9140 Skokie Boulevard, Skokie, IL 60077
Permanent Index Number: 10-16-408-060-0000

together with all the appurtenances and privileges thereunto belonging or appertaining.

IN TESTIMONY WHEREOF, the said BLANCHE BINDER, individually and as Co-Executor of the Estate of William Binder, deceased, has caused these presents to be signed this 12 day of February, 1997.

97111369

Blanche Binder
Individually and as
Co-Executor of the Estate of
William Binder, deceased

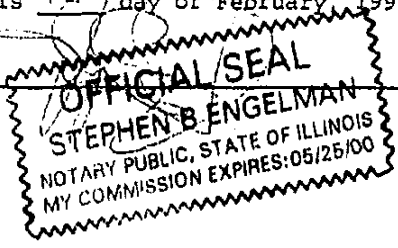
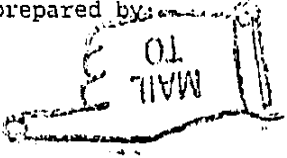
97111369

State of Illinois)
County of Cook) SS

I, STEPHEN ENGELMAN, a notary public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that Blanche Binder, individually and as Co-Executor of the Estate of William Binder, deceased, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day and acknowledged that she signed and delivered the said instrument as her free and voluntary act for the uses and purposes therein set forth.

GIVEN under my hand and notary seal this 12 day of February 1997.

This instrument was prepared by:
Engelman & Smith
4711 Golf Road, #907
Skokie, IL 60076
847/576-2610



COOK COUNTY
RECORDER
JUDITH M. ...
SKOKIE OFFICE

23.19

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REGISTRATION DISTRICT NO. **16.10**
REGISTERED NUMBER

STATE OF ILLINOIS
MEDICAL EXAMINER'S - CORONER'S
CERTIFICATE OF DEATH

STATE FILE NUMBER

601515

COPY

97111369

1. DECEASED-NAME FIRST MIDDLE LAST
WILLIAM BINDER

2. SEX **M**

3. DATE OF DEATH (MONTH, DAY, YEAR)
Jan 24 1996

4. COUNTY OF DEATH
Cook

5a. AGE - LAST BIRTHDAY (YRS) **74**

5b. UNDER 1 YEAR **5d. August 17, 1921**

5c. UNDER 1 YEAR HOURS **5d. August 17, 1921**

6a. HOSPITAL OR OTHER INSTITUTION NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)
First. FAREWELL Med

6b. IF HOSP. OR INST. INDICATED O.A. OPERATING DEPARTMENT (SPECIFY)
Med

7. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)
Chicago Illinois

8a. MARRIED NEVER MARRIED WIDOWED, DIVORCED (SPECIFY)
Married

8b. NAME OF SURVIVING SPOUSE (MARRIAGE, IF WIFE)
Blanche Morgan

9. WAS DECLARED EVERKNO'S AMBIGUOUS DECEASED (YES-NO)
Yes

10. SOCIAL SECURITY NUMBER
10.335-16-6640

11a. ENGINEER

11b. Retail

11c. INSIDE CITY (YES-NO)
Yes

11d. COUNTY
COOK

13a. 4724 W. Church St.

13b. Skokie

13c. YES

13d. ZIP CODE
60077

14a. White

14b. MOTHER'S NAME FIRST MIDDLE LAST
Mary Gordon

14c. YES

14d. MOTHER'S ADDRESS (STREET AND NO. OR R.F.D., CITY, STATE, ZIP)
17c.4724 W. Church St. Skokie Illinois 60077

15. INFORMANT'S NAME (TYPE OR PRINT) RELATIONSHIP
Arnold Binder 17b. Wife

16. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY, STATE, ZIP)
17c.4724 W. Church St. Skokie Illinois 60077

17a. Blanche Binder

17b. Wife

17c. 4724 W. Church St. Skokie Illinois 60077

18. PART I. Immediate Cause (Fetal condition or condition resulting in death)
(a) DELAYED CARDIOMYOPATHY

18. PART II. Other significant conditions contributing to death but not resulting in the underlying cause (shown in PART I)
(b) DUE TO OR AS A CONSEQUENCE OF
(c) DUE TO OR AS A CONSEQUENCE OF

19a. AUTOPSY (YES-NO)
Yes

19b. IF AUTOPSY PERFORMED AVAILABLE FOR TO COUNTY (YES-NO)
Yes

20a. PLACE OF INJURY (MONTH, DAY, YEAR)
20c. M/100

20b. HOUR

20c. LOCATION (CITY, VIL. OR TWP., OR RD. DIST. NO., COUNTY, STATE)
20d. Skokie Illinois

20d. IF FEMALE, WAS THERE A PRECEDING PREGNANCY (PAST THREE MONTHS)
20h. YES NO

21a. I 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
21b. Jan 24 1996

21c. DATE SIGNED (MONTH, DAY, YEAR)
21c. 1996

21d. DATE SIGNED (MONTH, DAY, YEAR)
22b. Jan 25 1996

22a. CORONER'S MEDICAL EXAMINER'S SIGNATURE
DR. Daniel A. Mandel

22b. CORONER'S NAME (TYPE OR PRINT)
DANIEL A. SIMMS, D.O.

22c. LOCATION (CITY OR TOWN)
Skokie Illinois

22d. STATE
Illinois

23a. BURIAL, CREMATION, REMOVAL (SPECIFY)
Burial

23b. CEMETERY OR CREMATORY-NAME
Shalom Cemetery

23c. CITY OR TOWN
Skokie Illinois

23d. STATE
Illinois

23e. DATE (MONTH, DAY, YEAR)
24d. Jan. 26, 1996

24a. FUNERAL HOME NAME
Shalom Cemetery

24b. STREET AND NUMBER OR R.F.D.
9200 N Skokie Blvd. Skokie Illinois 60077

24c. CITY OR TOWN
Skokie Illinois

24d. STATE
Illinois

24e. ZIP CODE
60077

25a. FUNERAL DIRECTOR'S SIGNATURE
Daniel A. Mandel

25b. FUNERAL DIRECTOR'S NAME
Daniel A. Mandel

25c. STREET AND NUMBER OR R.F.D.
5206 N. Broadway, Chicago Illinois 60640

25d. CITY OR TOWN
Chicago Illinois

25e. STATE
Illinois

25f. ZIP CODE
60640

26a. LOCAL REGISTRAR'S SIGNATURE
Adriana Lopez

26b. LOCAL REGISTRAR'S NAME
Adriana Lopez

26c. STREET AND NUMBER OR R.F.D.
5206 N. Broadway, Chicago Illinois 60640

26d. CITY OR TOWN
Chicago Illinois

26e. STATE
Illinois

26f. ZIP CODE
60640

26g. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
JAN 26 1996

I, SHEILA LYNE, RSW, 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 FOR 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 OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.

THIS CERTIFIED COPY VALID WHEN MULTICOLORED SIGNATURE SEALS AFFIXED

JAN 26 1996

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

UNOFFICIAL COPY

6/11/2011

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