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7043/0025 SS 003 Page 1 of 7
1998-05-28 11:01:55
Cook County Recorder 37.50



Chicago Title Insurance Company

DECEASED JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF COOK

} ss.

Order No. _____

Susan F. Mitchell being duly sworn
states that she resides at 17633 Hillside, in the Village of
Homewood, Illinois

That she was acquainted with FRANCES K. MITCHELL
deceased who, at the time of her death, was one of the owners of the land in Cook
County, Illinois, described on the reverse side hereof.

That the deceased died July 31, 1995, as evidenced by a
certified copy of death certificate of the deceased attached hereto.

That the deceased died:

- Leaving no Last Will & Testament.
- Leaving a Last Will & Testament a copy of which is attached hereto. The original of the unproven will should be filed with the Clerk of the Probate Division of the Circuit Court of _____ County, Illinois.
- Leaving a Last Will & Testament which was filed in the Unproven Will Box of the Probate Division of the Circuit Court of _____ County, Illinois about _____

That the total value of the estate of the deceased, including both real and personal property owned by the deceased either individually or in joint tenancy at the time of the death of the deceased, does not exceed the sum of statutory limits dollars.

Affiant makes this affidavit for that purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy, describing the above mentioned property.

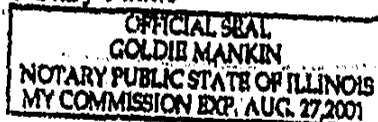
Subscribed and sworn to before me by the said

Susan F. Mitchell

this 13th day of May, A.D. 19 98

Goldie Mankin

Notary Public



Susan F. Mitchell

(affiant's signature)

9845

Legal Description

of premises commonly known as 17633 Hillside, Homewood, Illinois

LOT FOURTEEN (14) IN BLOCK FOURTEEN (14) IN DIXMOOR, BEING A SUBDIVISION OF THE NORTHEAST QUARTER (1/4) OF THE NORTHEAST QUARTER (1/4) OF SECTION THIRTY-SIX (36), TOWNSHIP THIRTY-SIX (36) NORTH, RANGE THIRTEEN (13), EAST OF THE THIRD PRINCIPAL MERIDIAN, ALSO THAT PART OF THE NORTH HALF (1/2) OF THE NORTH HALF (1/2) OF SECTION THIRTY-ONE (31), TOWNSHIP THIRTY-SIX (36) NORTH, RANGE FOURTEEN (14), EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING WEST OF A LINE DESCRIBED AS FOLLOWS:

BEGINNING AT THE NORTHWEST CORNER OF THE NORTHEAST QUARTER (1/4) OF SAID SECTION THIRTY-ONE (31), THENCE SOUTHEASTERLY ALONG THE CENTER LINE OF THE DIXIE HIGHWAY PRODUCED TO A POINT WHERE SAID CENTER LINE INTERSECTS THE WESTERLY LINE OF THE ILLINOIS CENTRAL RAILROAD COMPANY'S RIGHT OF WAY, THENCE IN A SOUTHEASTERLY DIRECTION ALONG SAID WESTERLY LINE OF SAID RIGHT OF WAY TO THE SOUTH LINE OF THE NORTH HALF (1/2) OF THE NORTH HALF (1/2) OF SAID SECTION THIRTY-ONE (31), ACCORDING TO THE PLAT THEREOF RECORDED JUNE 6, 1927, AS DOCUMENT 9,675,674 IN COOK COUNTY, ILLINOIS.

29-31-107-014 VOL. 21B

CKA: 17633 HILLSIDE HOMEWOOD IL 60430

Cook County Clerk's Office

MAIL TO { Bader and Donkel (Name) 20200 Governors Drive (Address) Olympia Fields, IL 60461 (City, State and Zip) }

OR RECORDER'S OFFICE BOX NO.

UNOFFICIAL COPY 7540688

REGISTRATION DISTRICT NO. <u>1005</u>	STATE OF ILLINOIS		STATE FILE NUMBER
REGISTERED NUMBER <u>611</u>	MEDICAL CERTIFICATE OF DEATH		
DECEASED-NAME FIRST MIDDLE LAST	SEX	DATE OF DEATH (MONTH, DAY, YEAR)	
<u>FRANCES K MITCHELL</u>	<u>2 FEMALE</u>	<u>3 JULY 31, 1995</u>	
COUNTY OF DEATH	AGE-LAST BIRTHDAY (YHR)	UNDER 1 YEAR UNDER 1 DAY	DATE OF BIRTH (MONTH, DAY, YEAR)
<u>COOK</u>	<u>5a. 92</u>	<u>5b. 5c.</u>	<u>5d. MARCH 9, 1903</u>
CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER	HOSPITAL OR OTHER INSTITUTION - NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)		IF HOSP. OR INST. INDICATE D.O.A. OR EMER. PM. INPATIENT (SPECIFY)
<u>CHICAGO HEIGHTS</u>	<u>ST. JAMES HOSPITAL</u>		<u>8c. INPATIENT</u>
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)	
<u>CHICAGO, IL.</u>	<u>9a. WIDOWED</u>	<u>8b. NONE</u>	
SOCIAL SECURITY NUMBER	USUAL OCCUPATION	KIND OF BUSINESS OR INDUSTRY	EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)
<u>10. 318-46-8099</u>	<u>11a. Housewife</u>	<u>11b. OWN HOME</u>	<u>12. 12</u>
RESIDENCE (STREET AND NUMBER)	CITY, TOWN, TWP, OR ROAD DISTRICT NO.	INSIDE CITY (YES/NO)	COUNTY
<u>13a. 17633 HILLSIDE</u>	<u>13b. HOMEWOOD</u>	<u>13c. YES</u>	<u>13d. COOK</u>
STATE	ZIP CODE	RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY)	OF HISPANIC ORIGIN? (SPECIFY NO OR YES - IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.)
<u>13a. ILLINOIS</u>	<u>13b. 60430</u>	<u>14a. WHITE</u>	<u>14b. [X] NO [] YES SPECIFY:</u>
FATHER-NAME FIRST MIDDLE LAST	MOTHER-NAME FIRST MIDDLE (MAIDEN) LAST		
<u>15. SOTER S. KERWIN</u>	<u>16. SUSAN T. COYLE</u>		
INFORMANT'S NAME (TYPE OR PRINT)	RELATIONSHIP	MAILING ADDRESS (STREET AND NO OR R.F.D., CITY OR TOWN, STATE, ZIP)	
<u>17a. SUSAN MITCHELL</u>	<u>17b. DAUGHTER</u>	<u>17c. 17633 HILLSIDE HOMEWOOD, ILLINOIS 60430</u>	
PART I. Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line.			IF PERSONALLY WITHIN OF THE COUNTY AT DEATH
Immediate Cause (Final disease or condition resulting in death)	<u>(a) Massive stroke</u>		
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST.	<u>(b) DUE TO, OR AS A CONSEQUENCE OF</u>		
	<u>(c) DUE TO, OR AS A CONSEQUENCE OF</u>		
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.			AUTOPSY (YES/NO)
			<u>19a. NO</u>
DATE OF OPERATION, IF ANY	MAJOR FINDINGS OF OPERATION	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?	
<u>20a.</u>	<u>20b.</u>	<u>20c. YES [] NO [X]</u>	
(1) DID (2) DID NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON	WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO)	HOUR OF DEATH	
<u>21a. JULY 30, 1995</u>	<u>21b. NO</u>	<u>21c. 9:05 P.M.</u>	
TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED.			DATE SIGNED (MONTH, DAY, YEAR)
<u>22a. SIGNATURE</u>			<u>22b. 8-2-95</u>
NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)			ILLINOIS LICENSE NUMBER
<u>RAYMOND S. YAZMAR, M.D.</u>			<u>22c. 36-51427</u>
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)			NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.
<u>DR. SPERUSIAN</u>			
BURIAL, CREMATION, REMOVAL (SPECIFY)	CEMETERY OR CREMATORY-NAME	LOCATION CITY OR TOWN STATE	DATE (MONTH, DAY, YEAR)
<u>24a. BURIAL</u>	<u>24b. HOLY SEPULCHRE</u>	<u>24c. WORTH, ILLINOIS</u>	<u>24d. AUG. 3, 1995</u>
FUNERAL HOME	NAME	STREET AND NUMBER OR R.F.D.	CITY OR TOWN STATE ZIP
<u>25a. RYAN FUNERAL HOME LTD.</u>	<u>18022 DIXIE HWY.</u>	<u>HOMEWOOD, ILLINOIS</u>	<u>60430</u>
FUNERAL DIRECTOR'S SIGNATURE			FUNERAL DIRECTOR'S ILL. LICENSE NUMBER
<u>25b. [Signature]</u>			<u>25c. 034-011800</u>
LOCAL REGISTRAR'S SIGNATURE			DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)
<u>28a. [Signature]</u>			<u>28b. August 2, 1995</u>

I HEREBY CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT COPY OF THE DEATH RECORD FOR THE DECEASED IN ITEM NO. 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.

DATE: August 2, 1995 SIGNED: John M. Costabile

AT: CHICAGO HEIGHTS, IL 60411 TITLE: LOCAL REGISTRAR

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WILL OF

FRANCES K. MITCHELL

I, FRANCES K. MITCHELL, of Homewood, Illinois, revoke all wills and codicils which I have made and declare this to be my will.

ARTICLE ONE

Family

I am a widow. I have two children now living:

SUSAN F. MITCHELL, presently residing in Homewood, Illinois, and
JEAN M. KRUSE, presently residing in Oak Lawn, Illinois.

ARTICLE TWO

Administration Expenses and Taxes

2.01 My Executor shall pay the expenses of my last illness and funeral, costs of administration including delivery and safe-guarding of bequests, and other proper charges against my estate, excluding debts secured by real estate or life insurance. My Executor shall pay all Federal and state death taxes (including any interest and penalties) payable by reason of my death.

2.02 All payments made under this Article shall be paid from the principal of my residuary estate, without apportionment or reimbursement from any person or other entity except as provided in Sections 2207 and 2207A of the Internal Revenue Code (or any successor provisions) for any taxes attributable to property over which I have a power of appointment or property in which I have a qualified terminable interest for life.

Frances K. Mitchell

*M.L.
MK*

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ARTICLE THREE
Bequests

3.01 I give one thousand dollars (\$1,000.00) to my daughter, JEAN M. KRUSE. I have made no other provision for my daughter who is financially independent, and who I have made adequate provisions for during my life.

3.02 I give one thousand dollars (\$1,000.00) to the SALESIAN MISSION of New Rochelle, New York, to be used as they see fit. In addition, I give the SALESIAN MISSION the additional sum of seventy-five dollars (\$75.00) for Gregorian Masses for the repose of my soul.

3.03 I give any dog or cat which I may own to my daughter SUSAN F. MITCHELL. In the event, my daughter, SUSAN F. MITCHELL is not living at my death, I direct my Executor to have my dogs and cats laid to rest for the animal's own happiness and tranquility.

3.04 I give all my tangible personal property, including jewelry, silver, clothing, automobiles, collections, furniture and furnishings and any insurance policies thereon, to my daughter, SUSAN F. MITCHELL, if she so survives me by thirty days. This bequest does not include cash, bank accounts, investment securities and insurance policies payable to the estate and I intend these articles to pass through my residuary estate.

3.05 In the event, my daughter SUSAN F. MITCHELL fails to survive me, I give all my tangible personal property, including jewelry, silver, clothing, automobiles, collections, furniture and furnishings and any insurance policies thereon, to my friend, LYNN MCINTYRE of Calument City, Illinois. This bequest does not include cash, bank accounts, investment securities and insurance policies payable to the estate and I intend these articles to pass through my residuary estate.

3.06 If any beneficiary under this Article is a minor at the time of distribution, my Executor may distribute such beneficiary's share to any person with whom the beneficiary is residing. The receipt of such person shall be a sufficient discharge to my Executor. Such person may hold such property for, or distribute it to, the beneficiary, or sell it and hold and invest the proceeds or expend them for the beneficiary. When the beneficiary reaches majority, any undistributed property or proceeds thereof shall be delivered to the beneficiary. If the beneficiary dies before reaching majority, any undistributed property or proceeds thereof shall be distributed as if they were part of his estate.

Susan F. Mitchell

*M.L.
S.M.K.*

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ARTICLE FOUR
Residuary Estate

4.01 I give all of my residuary estate, being all property passing under this will reduced by the payments and gifts provided for under the preceding Articles, but not including any property over which I have a power of appointment, to my daughter, SUSAN F. MITCHELL.

4.02 In the event my daughter, SUSAN F. MITCHELL, fails to survive me, I give my entire residuary estate being all property passing under this will reduced by the payments and gifts provided for under the preceding Articles, but not including any property over which I have a power of appointment, to my friend LYNN McINTYRE of Calumet City, Illinois.

ARTICLE FIVE
Administrative Provisions

5.01 Except as otherwise provided in this instrument, if any person entitled to distribution has not attained the age of twenty-one (21) years, his share shall vest in him but my Executor may distribute his share to a Custodian under the Illinois Uniform Transfers to Minors Act.

5.02 Whenever my Executor deems it to be in the best interests of a person to whom my Executor is directed or authorized to distribute property, my Executor may distribute such property upon receiving a written receipt, to any of the following, and my Executor shall not be required to see to the application of any distributions made:

- (a) Directly to the person;
- (b) By expending the money or using the property directly for the benefit of the person;
- (c) To a legally appointed Guardian of the person;
- (d) To an adult relative;
- (e) To anyone with whom the person is residing;
- (f) To anyone acting as the person's attorney in fact under a durable power of attorney.

James S. Mitchell

m. L. MEL

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My Executor shall not be liable for distributions made pursuant to this Paragraph 5.02.

5.03 For all purposes under this instrument:

(a) Adoption of a child shall have the same effect as if such child had been born to the adopting parents, but, except for a child adopted by me, only if such child was a minor at the time of the adoption.

(b) Where appropriate, words of the masculine gender include the feminine and words used in a plural or collective sense include the singular and vice versa.

ARTICLE SIX
Executor

6.01 I appoint my daughter, SUSAN F. MITCHELL, Executor of this will, but if she for any reason fails or ceases to act, PATRICIA A. DIXON of Westmont, Illinois shall act as Executor.

6.02 My Executor shall appoint an Ancillary Executor to act in any state where ancillary administration is necessary and where my Executor for any reason fails to qualify. Any ancillary Executor shall, with respect to such property subject to ancillary administration, have all the powers conferred upon my Executor, which, however, shall be exercised only with the approval of my Executor.

6.03 No surety or other security shall be required on any bond furnished by my Executor or Ancillary Executor in any jurisdiction for any purpose.

6.04 My Executor shall have, during the period of administration of my estate, the following administrative and investment powers, and any others granted by law, to be exercised without order of any court as my Executor determines to be in the best interest of my estate:

(a) To invest in or retain any property or interests in property, foreign or domestic, without regard to lack of diversification or lack of marketability and without being limited by any law concerning investments by executors, including, without limiting the generality of the foregoing, bonds, debentures, mortgages, notes (secured or unsecured), common or preferred stock, interests in common trust funds, interests in mutual funds, general partnerships and limited partnerships, joint ventures, oil, gas or other mineral interests, commodities, commodity futures, options, financial

Susan F. Mitchell

*SMZ
MKK*

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instrument futures and real estate. The Executor may, but shall not be required to, invest estate funds as if he were Trustee of said funds.

(b) To sell any property, for cash or on credit, at public or private sale; to exchange any property for other property; and to grant options to purchase.

(c) To collect, pay, contest, compromise or abandon claims of any kind.

(d) Unless otherwise provided in this instrument, to make payments, distributions and divisions of property in cash or in kind on the basis of fair market values at the time of payment, distribution or division; in so doing, to allot undivided interests in property and to allocate different kinds or disproportionate shares of property or interests therein; and to do so without regard to disproportionate allocations of unrealized gain or loss for federal income tax purposes.

(e) To enter into any transaction authorized by this Article with fiduciaries of trusts or estates in which any beneficiary of my estate has any interest even though such fiduciary is also Executor hereunder.

(f) To vote all shares of stock in person or by proxy.

(g) To disclaim any property or interest in property on my behalf, without court approval.

(h) To make such elections under the tax laws as my Executor deems proper. No compensatory adjustments shall be made by my Executor even though the elections may substantially affect the interest of a beneficiary under this instrument. The action of my Executor with respect to such elections shall be conclusive and binding on all beneficiaries.

7.05 The Executor is authorized to receive reasonable compensation at the time or times services are rendered. Compensation to persons employed by the Executor shall be in addition to compensation paid to the Executor.

This will, consisting of six pages, each of which has been identified by my name or initials, was signed by me on this 30th day of December, 1988, at Wheaton Park, Illinois.

Frances K. Mitchell
FRANCES K. MITCHELL

m.l.
MK

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The foregoing instrument was, on the date above written, signed and declared by the testator to be her last will in the presence of us, who at her request and in her presence and in the presence of each other, have hereunto subscribed our names as witnesses and we hereby certify that we believe the testator to be of sound mind and memory and under no undue influence.

Michael Laird residing at 6624 W 63rd Pl

Monica R. Kelly residing at Chicago, Illinois
22016 Muller Ave
Richard Park, Illinois

Frances K. Mitchell

STATE OF ILLINOIS
COUNTY OF COOK

Michael Laird and Monica R. Kelly, being duly sworn, state that on this 30th day of December, 1988, we saw FRANCES K. MITCHELL, the testator, sign the will hereto attached, in our presence, that we attested the will in the testator's presence and in the presence of each other, and that we believed the testator to be of sound mind and memory at the time of signing of the will.

Michael Laird
Monica R. Kelly

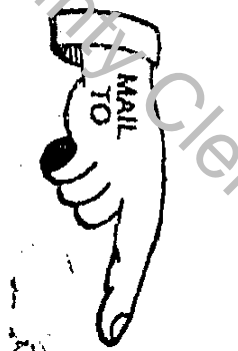
Sworn to and signed before me this 30th day of December, 1988.

Monica R. Kelly
NOTARY PUBLIC

OFFICIAL SEAL
MONICA R. KELLY
NOTARY PUBLIC STATE OF ILLINOIS
MY COMMISSION EXP. SEPT. 16, 1992

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Mail to

BADER & DONKEL
ATTORNEYS AT LAW
Suite 101
20200 Governors Drive
Olympia Fields, IL 60461