UNOFFICIAL COPY572924
8312/0004150 303 Page 1 of

1998-07-06 11:21:17 Look County Recorder

YTANION ROOM RECORDER A JESSE WHITE MARKHAM OFFICE



Chicago Title Insurance Company DECEASED JOINT TENANCY AFFIDAVIT

| STATE OF ILLINOIS SS. Order | No |
|---|--|
| Susan F. Mitchell | being duly sworn |
| states that she resides at 17633 Hillside, in the Homewood, Illinois | Village of xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx |
| . That she was acquainted with JOPN C. MITCHEL | I, |
| deceased who, at the time of his death, was one of the owners of the County, Illinois, described on the reverse side he ecf. | the land in Cook |
| That the deceased died September 4, 1988 certified copy of death certificate of the deceased attached he sto. | , as evidenced by a |
| That the deceased died: | |
| Leaving no Last Will & Testament. | Q _A , |
| E Leaving a Last Will & Testament a copy of which is attache will should be filed with the Clerk of the Probate County, Illinois. | d here to. The original of the unproven Division of the Circuit Court of |
| Leaving a Last Will & Testament which was filed in the Division of the Circuit Court of | e Unproven we'. Pox of the Probate County, Illinois about |
| That the total value of the estate of the deceased, including both the deceased either individually or in joint tenancy at the time of exceed the sum of statutory limits | h real and personal property owned by the death of the deceased, does not dollars. |
| Affiant makes this affidavit for that purpose of inducing the Chic its Title Insurance Policy, describing the above mentioned property. | cago Title Insurance Company to issue |
| Subscribed and sworn to before me by the said | |
| Susan F. Mitchell | |
| this 13th day of May, A.D. 19 98 | Augus I Mittelell |
| Notary Public OFFICIAL SEAL GOLDIE MANKIN NOTARY PUBLIC STATE OF ILLINOIS MY COMMISSION EXP. AUG. 27,2001 | (affiant's signature) |

UNOFFICIAL COP\$\$72924 (sage 2 see

Negal Description

| | | · · | | |
|-------------------------------|-------|------------|-------------|------------|
| | | | Homewood, | T111-00-10 |
| | 17633 | Hillgiae. | HOMEWOOD. | エエエエロのツラ |
| f ararnicae commonly known as | 1/000 | 1177777777 | 11011101110 | |
| | | | | |

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 LEST 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 (IN) 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 9,675,670 IN COOK COUNTY, ILLINOIS.

C/ort's Orrica

29-31-107-014 VOL. 21B

CKA: 17633 HILLSIDE HOMEWOOD IL 60430

THE STATE OF THE PARTY OF THE P

| | Bader and Donkel |
|---------|--------------------------|
| | (Name) |
| | 20200 Governors Drive |
| MAIL TO | Olympia Fields, IL 60461 |
| | (City, State and Zip) |

OR RECORDER'S OFFICE BOX NO.

UNOFFICIAL COPS772924 Page 3 of 7

| | | WITH, DIR, YEARS | er 4, 1988 | COUNTY OF DEATH | IF HOSP, OR BAST, INDICA | OPERER RA. MPANENT (SPECIFY) 74. Throat ient | inances and 4. wrft) | KERWIN | MAR OR DATES OF SERVICE | 13d. //O/1/2 | 4. Illinois | 177 | OCONION | Tutto 60429 | e, Hazel Crest, | BETWEEN CHEST AND VEATH | 78.5 | | 001/19 | 2 yes | IF YES WERE FROMASS CON- SOCRED IN DETERMINAND CALSE OCEAN | | | 10 pd a | DATE SIGNED — PROFILE DEL TEAU | UNBER | 3644767 | THIS DEATH THE IT BE MOTIFIED. | DATE MONTH, DAT, YEAR) | * | ILLINOIS 60430 | IOIS LICENSE NUMBER | PATENTAL REGISTRAN INCANDED. YEARS | (BASED ON 1970 U.S. STANDARD CERTIFICATE) |
|----------------------|----------------------|------------------|-----------------------|--|---|--|----------------------------------|-----------------|-------------------------|-----------------------|-------------------|----------------|-----------|---------------------------------|-------------------------|---|------------|------------------------|---|-------------------|--|-----------------------------|--------|---|--|--------------------------|---|---|---------------------------------------|--------------|-------------------------|---------------------|---|--|
| State fue Reserve | OF DEATH | <u>a</u> | 2 Male 1. September | DATE OF BIRTH - (MO, DAY, TEAR) | I COCOLICATIONET TO LYUN | tal | NAME OF SURVIVING SPOUSE - | ". FRANCES | | COUNTY | | ON MAME , PROT | 1AKGAGE T | E1 A-190 ORRFO | 17800 5. Vedzie Avenue. | 8 (8) O 12 | Out | | | 6 | VS401UA 081.431 C/C/ _est | 3: | | WAS CORONER OF MEDICAL HOUR OR DEATH EXAMINER NOTIFIED? YES I NO 219. | | <u>4</u> | aconary 1/1 m | NOTE: IF AN INJURY WAS INFOLVED IN THIS DEATH THE CORDNER OR WEDICAL EXAMINER MUST BE MOTIFIED. | CIT OR TOWN STATE | CIT OR IONN | SIDUTIONE MOOD ILLINOIS | 75e 8607 | They are properties by your REGS | X |
| STATE OF ILLINOIS | CERTIFICATE | LAST | ı | MOS DATE WOODS NAME | HOSPIAL OR OTHER INSTITUTION — NAME OF MOT IN STITUTE, ONE STREET AND MANAGEN | uth Suburban Hospital | WARRIED, NEYER MA | | | DA POLED DISTRICT NO. | | NST MOTE | ì | - | m Records m 178 | ENTER ONLY ONE CLUCE PER LINE (JR. C. C. O.L.) | iratury ar | 0 % 5 / 5 / 5 / 5 | LOUKAI 21 | and work | ALT NOT RELATED TO C. 155, GWEST IN PART F (16) | | J | Con. ELM | PLACE AND DUE TO THE C | LITTLE OH PROUS | ~ | (TYPE ON PERIT) | HEF LOCATION | T W | 2 DIXIE HIGHWAY | `` | male Her | Illinois Department of Fublic Health - Office of Vital Bread |
| 0,0 | MEDICAL | | JOHEN JOHEN | CHIGH ON DESCENT AGE — LAST DISTRIBUTE (TRS) LANCE OF SECURITY LANC | /EN 38.0 | r. Soi | CITIZEN OF WHAT COUNTRY | * United States | Design Occupation | 1 | | AUCH MICOLE | 10 J. 6 | | ina managana | WEATH WAS CAUSED BY: | 10 CB2 D | OR AS A CONSECUENCE OF | (b) OUE TO OR AS A CONSCOUENCE OF: | (main | HTIONS; concitors contributing to death in | MAJOR FINDINGS OR OPERATION | 200. | | THE TIME OF E. | | 32 35 1/01/12 | סיותבון והאו כן אונדיוב | ATORY - NAME | HANE STR | 15022 | 201 Chen | DIT. M.D. Off 120 C. | |
| REGISTRATION / | REGISTERED NUMBER | DECEASED - NAWE | - 1 | RAGE — Jamie, mar. American Boun, Etc. Jepecs 17 | CITY, TOWN, TWE OR ROAD DISTRICT NUMBER | m Hazel Crest | STATE OF BIRTH - (of MOT U.S.A.) | . Illinois | SUCIAL SECURIT MURGEN | -13 | 4. 17633 Hillside | FATHER - NAME | HOL SI | THE CHARANT NAME (TYPE OR PERC) | M Kita J. Kosana | PART 1. | • | ¥8 | CHAMEDIATE CAUSE (a) STATING THE UNDER- | LYING CAUSE LAST. | PART B. OTHER SIGNERCANT COND | DATE OF OPERATION, IF ANY | . 20a. | 1 (DD) (DD NOT) ATTEND THE DECEASED AND LAST SAW HIMMER ALIVE ON 21a. | TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT | ALLE STUMMUNE OF CENTERS | 23c S S S S S S S S S S S S S S S S S S S | TOWE OF ALLENDING PRINCIPAL IN | BURAL, CREMATION, REMOVAL (SPICET) | FUNERAL HOWE | 25. RYAN EH | 256. V PALLE | 10CAL REGINAMENGILISMOTT, IN 26. PREGISTRAM | VR200 REV. 5/12 |

SIGNED

I hereby certify that the foregoing is a true and correct copy of the desth record for the decedent named in item I and that this record was established and filed in accordance with the provisions of the Illipois staruttered in accordance with the provisions of the Illipois staruttered.

relating to the registration of births, stillbirths and deaths.

At Cook County Department of Public Health

Official TWile, Chief Deputy Regist:

OF

JOHN C. MITCHELL

I, JOHN C. MITCHELL, of the Village of Hazel Crest,
County of Cook and State of Illinois, declare this to be my Last
Will and revoke all Wills and Codicils by me heretofore made.

ARTICLE ONE

I hereby direct that estate, inheritance or other succession taxes incurred by reason of my death shall be paid by my Executor out of the principal of my residuary estate without contribution or reimbursement from any person.

ARTICLE TWO

I give to my wife. FRANCES K. MITCHELL, if she survives me for thirty (30) days, all of my personal and household effects including but not limited to automobiles, clothing, jewelry, furniture, books and pictures. If my wife does not survive me for thirty (30) days, then I give all of my personal and household effects to my daughter, SUSAN F. MITCHELL, if she survives me for thirty (30) days. If my daughter, SUSAN F. MITCHELL, does not survive me, then I give all of my personal and household effects to my daughter, JEAN M. KRUSE, presently residing at 10816 South Kostner, Oak Lawn, Illinois.

ARTICLE THREE

If my wife, FRANCES K. MITCHELL, does not survive me for a period of thirty (30) days, it is my wish that any dog I may own shall become the property of my daughter, SUSAN F. MITCHELL. In the event my daughter my daughter shall predecease me, then it is my wish that any dog I may own be laid to rest for the dog's own happiness and tranquility.

293 Dn.

John C. Mittell

Property of Cook County Clerk's Office

ARTICLE FOUR

Notwithstanding the provisions of ARTICLE TWO set forth above, I give and bequeath to the MARYKNOLLS FATHERS of Maryknoll, New York, 10545, the sum of ONE THOUSAND DOLLARS (\$1,000.00) to be used as they see fit and the additional sum of SEVENTY-FIVE DOLLARS (\$75.00) for gregorian masses for the repose of my soul.

ARTICLE FIVE

All the rest:, residue and remainder of the property, real or personal and wheresoever situated of which I may die seized or possessed of or which I may own or have any interest in at the time of my death, I give, devise and bequeath to my wife, FRANCES K. MITCHELL, provided she is alive on a day thirty (30) days after my demise, and in case my wife shall not survive me or shall not be alive on a day thirty (30) days after my death, then it is my will that all my property and estate, as aforesaid given, devised and bequeathed to my wife, shall go and in such case the same is hereby given, devised and bequeathed to my children in the following proportions: SUSAN F. MITCHELL, two-thirds (2/3) of my estate and JEAN M KRUSE, one-third (1/3) of my estate, provided that each shall be living thirty (30) days after the date of my death. In the event that either of my children shall fail to survive me for thirty (30) days, but leave issue, then the share such child would have received is to go to her children, share and share alike.

ARTICLE_SIX

I hereby appoint my wife, FRANCES K. MITCHELL, Executor of this my Last Will and Testament. If for any reason she shall fail to become or shall cease to act as such Executor, then in such event I hereby appoint SUSAN F. MITCHELL Executor of this my Last Will and Testament. No bond or other surety shall be required of any person, herein named and acting hereunder, for the faithful

D93 LM.

Property of Cook County Clerk's Office

performance of her duties as such Executor. I hereby give my
Executor full power and authority to sell at public or private
sale and at such time or times as my Executor in her absolute
discretion shall deem best and without order of Court any property,
real or personal, belonging to my estate. I further authorize
and empower my Executor to make distribution of my estate in kind
or in cash, or partly in kind and partly in cash, and to make
division thereof in undivided interests. I also give my Executor
full power and authority to settle and compound any claims, either
in favor of or against my estate, as to my Executor shall seem
best, and for the purposes aforesaid to execute and deliver all
proper and necessary conveyances and to give full receipts and
discharges.

| | IN | WITN | ESS | WHERE | CF, I | have | hereunto | set my | hand | and | seal |
|------|-----|--------|------|-------|-------|---------|----------|----------|------|-----|-------|
| this | 7.6 | 14/1 a | ay o | £ | 02103 | In fell | | , 198 | 0. | | |
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| | | | | | _ | Org | On 6. | Mistella | 1941 | (s | SEAL) |
| | | | | | 11 | / | 95. | | | | |

The foregoing instrument was on the day of the date thereof, signed, sealed and declared by the said Testator, JOHN C. MITCHELL, to be his Last Will and Testament, in the presence of us, who at his request and in his presence and the presence of each other, have hereunto subscribed our names as witnesses; and we hereby certify that we believe him to be of sound mind and memory and under no undue influence.

| D9 - Below | residing at | 321 Hermoon |
|------------|-------------|----------------|
| | residing at | Park Forest Il |
| | | Hisk Longe OC |
| | residing at | |

Property of Coot County Clert's Office

UNOFFICIAL COPY SESSION OF THE PROPERTY OF THE

STATE OF ILLINOIS)

(COUNTY OF C O O K)

We, the attesting witnesses to the Last Will and Testament of JOHN C. MITCHELL, on oath state that each of us was present on Sept 26, 1980, and saw the Testator sign the said Last Will and Testament of which this affidavit is a part, in our presence; that the said Last Will and Testament was attested by each of us in the presence of the Testator; and that each of us believed the Testator to be of sound mind and memory at the time he signed the aforesaid Last Will and Testament.

Goldie Marken

Subscribed and Sworn to Before me this 26 77 day

of sept.

1980.

Notary Public

My Commission Expires: 0-18-81

10/7/5 Opportunity of the state of the state

BADER & DUNKEL ATTORNEYS AT LAW Suite 161 20200 Governors Drivy Olympia Fields, IL 8041

BADER & DUNKEL
ATTORNETS AT LAW
Suite 101
20200 Governors Criva
Olympia Fields, IL 80411