

98354806

A298-10  
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 13<sup>th</sup> day of April, 1998

19

by first party, Grantor,

*William H. Taylor Sr., A WIDOWER*

whose post office address is

*4406 W Lakeview Dr. Country Club Hills, Ill.  
60478*

to second party, Grantee,

*William H. Taylor Jr.*

whose post office address is

*6944 S Honore Ave Chicago Illinois  
60636*

WITNESSETH, That the said first party, for good consideration and for the sum of *Ten* Dollars (\$ *10.00*) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances there- to in the County of *COOK*, State of *Illinois* to wit:

*See attached for legal*

*Tax # 20-19-418-041*

*Property address 6944 S. Honore  
Chicago, IL 60636*

# UNOFFICIAL COPY

98354876

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

State of Ill

County of Cook

On April 13 1998 before me, appeared William H. Taylor Sr. personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Carmen Pierzchalski  
Signature of Notary

State of Ill

County of Cook

On April 13 1998 before me, appeared William H. Taylor Sr. personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Carmen Pierzchalski  
Signature of Notary

Affiant Known Produced ID  
Type of ID DL# 460-9284-4353

"OFFICIAL SEAL"  
CARMEN PIERZCHALSKI  
Notary Public, State of Illinois  
My Commission Expires August 7, 2001

"OFFICIAL SEAL"  
CARMEN PIERZCHALSKI  
Notary Public, State of Illinois  
My Commission Expires August 7, 2001

Affiant Known Produced ID  
Type of ID DL# 460-9284-4353  
(Seal)

William H. Taylor Sr.  
Signature of Preparer

William H. Taylor Sr.  
Print Name of Preparer

4106 W. Lakeview Dr.  
Address of Preparer  
COUNTRY CLUB HILLS, IL  
60478

mail TO:  
William H. Taylor  
6944 So. Honore  
Chicago Ill 60636



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983548116

Property of Cook County Clerk's Office

*Legal*

LOT 35 IN BLOCK 2 IN B. M. BAKER'S ADDITION TO ENGLEWOOD ON THE HILL, A SUBDIVISION OF THE NORTH EAST 1/4 OF THE SOUTH WEST 1/4 OF THE SOUTH EAST 1/4 OF SECTION 19, TOWNSHIP 38 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

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2025-01-01

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## STATEMENT BY GRANTOR AND GRANTEE

98354806

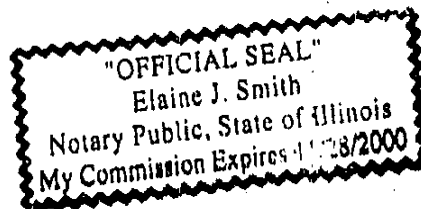
The grantor or his agent affirms that, to the best of his knowledge, the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate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

Dated 4-30, 19 98 Signature: William H. Taylor Jr.  
Grantor or Agent

Subscribed and sworn to before me by the  
said \_\_\_\_\_

this 30<sup>th</sup> day of April  
1998.

Elaine J. Smith  
Notary Public



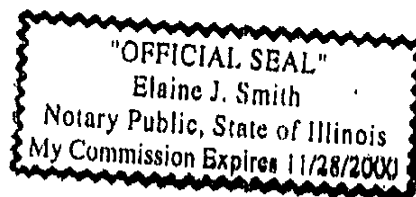
The grantee or his agent affirms and verifies that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois,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

X Dated 4-30, 19 98 Signature: William H. Taylor Jr.  
Grantee or Agent

Subscribed and sworn to before me by the  
said \_\_\_\_\_

this 30<sup>th</sup> day of April  
1998.

Elaine J. Smith  
Notary Public



NOTE: Any person who knowingly submits a false statement concerning the identity of a grantee shall be guilty of a Class C misdemeanor for the first offense and of a Class A misdemeanor for subsequent offenses.

[Attach to deed or ABI to be recorded in Cook County, Illinois, if exempt under provisions of Section 4 of the Illinois Real Estate Transfer Tax Act.]

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I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death and record for the decedent named in item 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 May 22, 1996

SIGNED

*Joselina Danek*  
Official Title Chief Deputy Registrar

At Cook County Dept. of Public Health  
1010 Lake Street  
Oak Park, IL 60301

MEDICAL CERTIFICATE OF DEATH

STATE OF ILLINOIS

NUMBER 11

DISTRICT NO. 160  
REGISTERED NUMBER

1. DECEASED NAME HILDA TAYLOR

FIRST MIDDLE LAST

SEX FEMALE

DATE OF DEATH (MONTH, DAY, YEAR) 3 MAY 18, 1996

2. COUNTY OF DEATH COOK

AGE LAST BIRTHDAY (YRS) 48

DATE OF BIRTH (MONTH, DAY, YEAR) 5d APRIL 01, 1948

6c. HAZEL CREST  
6d. SOUTH SUBURBAN HOSPITAL

3. CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER

11a. Teacher

11b. Educational

11c. COOK

4. RESIDENCE (STREET AND NUMBER)

13a. 4106 W LAKE VIEW DRIVE

13b. COUNTRY CLUB HILLS

13c. COOK

5. STATE ILLINOIS

14a. Black

14b. YES

14c. COOK

6. FATHER NAME Elbert

15. MIDDLE LAST

15a. Moncure

15b. Ruth

15c. Patterson

7. MOTHER NAME Avis Bolton

16. MIDDLE LAST

16a. Ruth

16b. Patterson

8. PART I Immediate Cause (Final diagnosis or condition resulting in death)

(a) Metabolic

(b) Cardiovascular breakdown

9. CONDITIONS, IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST

(c) Hypertension

10. PART II Other significant conditions contributing to the underlying cause listed in PART I

10a. Hypertension

10b. Hypertension

11. DATE OF OPERATION, IF ANY

20a. 20b.

11a. YES 11b. NO

12. ILLINOIS IDENTIFICATION NUMBER (IF KNOWN)

21a. M-18-1996

21b. NO

13. SIGNATURE OF PHYSICIAN

22a. DR. LINOCH PRASAD

22b. 5/20/96

14. NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER)

22c. DR. LINOCH PRASAD

22d. 036-054284

15. REMARKS

23. 24c. Hillside, Illinois

23a. 04:45 PM

16. LOCAL CEMETERY

24a. Oakridge Cemetery

24b. May 25, 1996

17. FUNERAL DIRECTOR'S SIGNATURE

25a. A.A. Rayner & Sons

25b. Chicago, Illinois

18. LOCAL REGISTRAR'S SIGNATURE

26a. KAREN L. SCOTT, M.D.

26b. May 22, 1996

19. REGISTRAR

26c. Joselina Danek

26d. May 22, 1996

26e. 034-011784

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