

UNOFFICIAL COPY

99351679

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1999-04-13 09:25:54  
Cook County Recorder 35.50



99351679

A136-10

### CLAIM OF LIEN

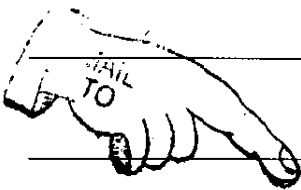
State of Illinois

April 12, 1999 (year)

County of Cook

SS. 417-70-1456

Before me, the undersigned Notary Public, personally appeared Janice E. Curtis



who duly sworn says that he is (the lienor herein) (the agent of the lienor herein) (Delete One)

Janice E. Curtis

(Lienor's Name)

whose address is 1249 W. 95th Place, Chicago, Illinois 60643

(Lienor's Address)

and that in accordance with a VERBAL contract with Robert Johnson

LOAN TO PAY FUNERAL EXPENSES OF NAN DUPREE-KANTER

lienor furnished ~~labor, services or materials consisting of~~ (Describe specially fabricated materials separately)

(SEE ATTACHED LEGAL DESCRIPTION)

on the following described real property in Cook County, State of Illinois  
(Describe real property sufficiently for identification, including street and number, if known)

12716 S. Winchester  
Blue Island, Illinois

owned by NAN DUPREE KANTER

of a total value of Six thousand nine hundred sixty-four/.38¢ dollars (\$6,964.38)

of which there remains unpaid \$ 6,964.38, and furnished the first of the items on

\_\_\_\_\_ (year) and the last of the items on \_\_\_\_\_

\_\_\_\_\_ (year) and (if the lien is claimed by one not in privity with the owner) that the lienor served his notice to

owner on \_\_\_\_\_ (year) by \_\_\_\_\_

(Method of Service)

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and, (if required) that the lienor served copies of the notice on the contractor on \_\_\_\_\_, \_\_\_\_\_ (year),

by \_\_\_\_\_, and on the subcontractor on \_\_\_\_\_,

(Method of Service)

\_\_\_\_\_ (year), by \_\_\_\_\_

(Method of Service)

Janice E. Curtis  
Lienor

By \_\_\_\_\_  
Agent

State of Illinois

County of Cook

On April 12, 1999 before me,

appeared Janice E. Curtis

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/h er/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.

Signature Meredith Taussig

Signature of Notary



Affiant  Known  Produced ID  
Type of ID \_\_\_\_\_  
(Seal)

***LEIN ON THE FOLLOWING REAL ESTATE***

**LEGAL DESCRIPTION**

12716 SOUTH WINCHESTER  
BLUE ISLAND, ILLINOIS 60406

P.I.N.# 25-31-200-025, 25-31-200-026

LOT 13 AND 14 BLOCK 4 IN BLUE ISLAND SUPPLEMENT, A SUBDIVISION OF THE NORTHWEST 1/4 OF THE NORTHEAST 1/4 OF SECTION 31, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

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**LOOMIS FUNERAL HOME, INC.**

420 WEST MAIN STREET  
APOPKA, FLORIDA 32703  
(407) 860-1007

Charges are only for those items that you selected or that are required. If we are required by law or by a cemetery or crematory to use any items, we will explain the reasons in writing below.

If you selected a funeral that may require embalming, such as a funeral with viewing, you may have to pay for embalming. You do not have to pay for embalming you did not approve if you selected arrangements such as a direct cremation or immediate burial. If we charged for embalming, we will explain why below.

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DECEASED NAN E. DUBRO-KWATER No. \_\_\_\_\_  
DATE OF DEATH \_\_\_\_\_  
PLACE OF DEATH \_\_\_\_\_  
DATE OF STATEMENT 5-4-98

**CASH ADVANCES**

Certified Copies of Death Certificate  
8 @ \$ 5.00 each \$ 40.00

Clergy \_\_\_\_\_  
Musician \_\_\_\_\_  
Paid Newspaper Notice \_\_\_\_\_  
Cemetery \_\_\_\_\_  
Other AIR FARE 244.38

TOTAL CASH ADVANCES \$ 284.38

We charge you for our services in obtaining: (specify cash advance items).

**SERVICES, FACILITIES & TRANSPORTATION**

Basic Services of Funeral Director & Staff ..... \$ 995.00  
Embalming ..... 495.00  
Other Preparation of Body ..... 300.00  
Use of Facilities & Staff for Viewing / Visitation ..... \_\_\_\_\_  
Use of Facilities & Staff for Funeral Ceremony ..... \_\_\_\_\_  
Use of Facilities & Staff for Memorial Service ..... \_\_\_\_\_  
Use of Equipment & Staff for Graveside Service ..... \_\_\_\_\_  
Use of Equipment & Staff for Church Service ..... \_\_\_\_\_  
Transfer of Remains to Funeral Home ..... 250.00  
Hearse ..... \_\_\_\_\_  
Limousine ..... \_\_\_\_\_  
Sedan ..... \_\_\_\_\_  
Service / Utility Vehicle ..... 150.00

TOTAL SERVICE CHARGE ..... \$ 2190.00

**SUMMARY**

Total Funeral Home Charges ..... \$ 4390.00  
Local Sales Tax (if applicable) ..... \$ \_\_\_\_\_  
State Sales Tax (if applicable) ..... \$ \_\_\_\_\_  
Total Cash Advances ..... \$ 284.38  
**GRAND TOTAL** \$ 4674.38

Less Credits and Payments  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
Total Credits ..... \$ \_\_\_\_\_

Billing To PATRICKASH PR

**BALANCE DUE** ▶ \$ 4674.38

**MERCHANDISE**

Casket (or alternative container) ..... 2100.00  
Name/No. YORK UTRN  
Material 20g  
Color white/black

Outer Burial Container ..... \_\_\_\_\_  
Name/No. \_\_\_\_\_  
Material \_\_\_\_\_

Clothing ..... \_\_\_\_\_

Acknowledgement Cards ..... \_\_\_\_\_  
Register Book ..... \_\_\_\_\_  
Memory Folders / Prayer Cards ..... \_\_\_\_\_

Cremation Urn ..... \_\_\_\_\_

TOTAL MERCHANDISE ..... \$ 2100.00

**DISCLOSURES**

Reason for embalming for Reburial

If any law, cemetery or crematory requirements have required the purchase of any items listed, the law or requirement is explained below.

**ACKNOWLEDGEMENT AND AGREEMENT**

I hereby acknowledge that I have the legal right to arrange the final services for the deceased, and I authorize this funeral establishment to perform services, furnish goods, and incur outside charges specified on this Statement. I acknowledge that I have received the General Price List and the Casket Price List and the Outer Burial Container Price List.

Terms of Payment: \_\_\_\_\_

Full payment is due no later than \_\_\_\_\_  
If any payment is not paid when due, an unanticipated LATE CHARGE of 7 % per month (ANNUAL PERCENTAGE RATE 18 %) on the unpaid balance will be due. I agree to pay the Balance Due listed on this Statement, plus any Late Charge. In the event I default in payment to this funeral establishment, I agree to pay reasonable attorney's fees and court costs in addition to any Late Charge applicable. I understand and agree that I am assuming personal liability for the charges set forth in this Statement and that this is in addition to the liability imposed by law upon the estate of the deceased. By my signature below, I hereby agree to all of the above and acknowledge receipt of a copy of this Statement.

**SPECIAL SERVICES**

Forwarding Remains to: \_\_\_\_\_  Receiving Remains from: \_\_\_\_\_

Immediate Burial ..... \_\_\_\_\_  
Direct Cremation ..... \_\_\_\_\_  
Other AIR TRAY ..... 100.00

TOTAL OF SPECIAL CHARGES ..... \$ 100.00

TOTAL FUNERAL HOME CHARGES ..... \$ 4390.00  
(This total does not include Cash Advances)

Signed R. Patricia Chason Dated \_\_\_\_\_  
Social Security Number 358 34-7351

Signed Patricia Robinson Dated 5/15/98

**ACCEPTANCE** This funeral establishment agrees to provide all services, merchandise and cash advances indicated on this Statement.

By \_\_\_\_\_

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I-(we)-hereby authorize the Funeral and/or Burial expenses listed within, and I-(we)-hereby represent that I-(we)-have sufficient resources in money legally available to the THE WILLIAMS CHAPEL, for the payment of the aforesaid sum; and I-(we)-hereby covenant and agree to pay for the same IN FULL or furnish sufficient collateral for the herein listed services--on or before the date of said services; and prior to the scheduled hour of the same.

In accord with State and Federal trade commission regulations, I-(we)-herewith acknowledge being furnished with all documentation and estimates of cost pursuant to services herein listed.

Signed \_\_\_\_\_

Address \_\_\_\_\_

Witness \_\_\_\_\_

Date \_\_\_\_\_ 19 \_\_\_\_\_

Signed \_\_\_\_\_

Address \_\_\_\_\_

Witness \_\_\_\_\_

Date \_\_\_\_\_ 19 \_\_\_\_\_

## IN ACCOUNT WITH STATEMENT

The Williams Chapel  
ROBERT E. WILLIAMS — MATTIE B. WILLIAMS  
Bereavement Counselors

Phone: 773-PRescott 9-0155

11053 South Vincennes Avenue Chicago, Illinois 60643

In Account with:

NAME MRS. JANICE CURTIS

ADDRESS \_\_\_\_\_

CITY AND STATE CHICAGO, ILLINOIS

For Services of the late: NAN DU PREE - KANTER

DATE SEPTEMBER 8th, 1998 TOTAL AMOUNT \$ 2,290.00

YOUR ACCOUNT IS ITEMIZED ON THE INSIDE

99351679

THE WILLIAMS CHAPEL

0122501183

00:08

09/28/1998

Removal of Professional Services and	\$ 1,055.00
Casket	
Clothing	
Printing	
Certified Copies of Death Certificates	
Newspaper Notices	
Flowers	85.00
Mausoleum or Grave	
Mausoleum or Grave Opening and Interment Service	800.00
Burial Vault or Grave Box	
Installation of V.A. Cemetery Marker	350.00
Headstone or Monument	
Saturday or Night Services	
Hearse - Air or Rail Transportation for Remains	
Extra Limousines (\$ ) Each	
Air Shipping Tray	
Escort Fare	
Out of Town Chapel's Services	
Cash Advance Finance Fee	
Minister and Musician	
State Sales Tax	
City Sales Tax	
Total	\$ 2,290.00

\*Our Professional Services include the following:

- Unintended Personal and Staff Services
- Bereavement Counseling
- Professional Care:
  - (Preservation, Restorative Art, Coiffure, Dressing and Casketing)
  - Coordinating physicians Health Dept. and Medical Examiner's Service
  - Procuring Transit and Burial Permits and Certified Copies
  - Advise and Assistance with Merchandise Selections
  - Assistance with Arrangements with Cemetery
  - Use of one Limousine for Wake, Rosary and Memorial Worship Services
  - Vehicle for Flower --- (If Needed)
  - Use of Chapel Facilities and Equipment for:
    - a. Visitors
    - b. Wake or Rosary
    - c. Memorial Worship Service
  - Visitor's Register
  - Handling of Flowers
  - Assistance in Filing Insurance and Estate Papers
  - Pall Bearers' Gloves
  - Fifty Appreciation Cards
  - Directional Services
  - Coordinating Out of Town Services

economy with Sacred Honor and Devoid Attention to Your Distinctive Precious Memories

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Duplicate

# The Williams Chapel

"DEDICATED FUNERAL SERVICE"

PRESCOTT 9-0155  
11053 SOUTH VINCENNES AVENUE  
CHICAGO, ILLINOIS 60643

ROBERT E. WILLIAMS, MORTICIAN

DATE Sept -8 1998

RECEIVED FROM Mrs. Janice Curtis  
Two Thousand Two Hundred Ninety <sup>00</sup> DOLLARS \$ 2,290.<sup>00</sup>  
FOR Payment for funeral services of the late  
Mrs. Nan Lee Free-Konter

AMOUNT OF ACCOUNT...\$ 2,290.00  
AMOUNT PAID.....\$ 2,290.00 THANK YOU  
BALANCE DUE.....\$ 0

BY [Signature]

CASH  CHECK  M.O.

County of Cook County Clerk's Office

12716 S. Winchester - Blue Island  
 Acct # 4-06-05-28348 2343

RICHARD CURTIS  
 JANICE CURTIS  
 PH. 445-7359  
 1249 W. 85TH PL  
 CHICAGO, IL 60643

DATE June 24 1997 2-35A/710  
 191030000

PAY TO THE ORDER OF Northern Illinois \$ 1,146.00

One thousand one hundred and forty six DOLLARS

Windsor Bank  
 1857 N. Dearborn St. • Chicago, IL 60643

MEMO North Shore-Kentwood  
4901 North Lincoln Ave - Atlanta, FL

⑆071003616⑆ ⑆191030000⑆ 2343 ⑆0000114500⑆

ENDORSE HERE

FOR DEPOSIT ONLY  
 FIRST NATIONAL BANK  
 AS AUTHORIZED BY FEDERAL RESERVE BOARD  
 NORTH BRANCH  
 222 ACCY BLDG  
 CHICAGO, ILL 60601

DO NOT WRITE IN THESE SPACES  
 FEDERAL RESERVE BOARD OF GOVERNORS