

MORTGAGE

FIRST NATIONAL BANK
OF EAST CHICAGO, INDIANA
MAIN OFFICE
720 WEST CHICAGO AVENUE
EAST CHICAGO, INDIANA 46312

91050313

THIS INDENTURE WITNESSETH, That Thomas E. Francisco ("Mortgagors")

of Lake County, State of Indiana, MORTGAGE S and WARRANT to FIRST NATIONAL BANK OF EAST CHICAGO ("Mortgagee") the following described real estate located in Lake County, Indiana:

Common address 2541 W. Oakwood Drive Gary Indiana
(Street Address or R.R.) (City) (Twp.) (State)

The Legal Description as follows:

Lot 25 in Block 3 in A.A. Lewis and Company's Oak Woods Subdivision, as per plat thereof, recorded in Plat Book 23, page 5, in the Office of the Recorder of Lake County, Indiana.



STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
Oct 4 9 30 AM '91
ROBERT L. GREENLAND
RECORDER

together with all rights, privileges, interests, easements, hereditaments, appurtenances, improvements and fixtures now or hereafter located upon or appertaining to such real estate (collectively referred to as the ("Mortgaged Premises")); and all rents, issues, income and profits thereof, or secure the payment, when due of certain PROMISSORY ("NOTE(S)").

dated September 17, 1991, in the sum of \$ 11,640.96
dated _____, 19____, in the sum of \$ _____
dated _____, 19____, in the sum of \$ _____

with interest and insurance,

with terms of payment as therein provided, or as extended or renewed, executed by Mortgagors to Mortgagee.

For the purpose of inducing the Mortgagee to make the loan hereby secured; the Mortgagor(s) represent to the Mortgagee, that Mortgagor is the owner in fee simple of the premises herein mortgaged, that legal title thereto is free and clear from all incumbrances of whatsoever kind of nature, except current taxes and

that this mortgage is only other encumbrance on said premises; and that the mortgagors and each of them are of the full age of 18; and suffers no incapacity and have authority to execute this mortgage. Mortgagors jointly and severally covenant and agree with Mortgagee that:

FIRST. That the Mortgagor(s) will pay to the Mortgagee the sums of money above mentioned without relief from valuation or appraisal laws.

SECOND. That until said note(s), the interest thereon and all of said mortgage debt is paid in full, the Mortgagor(s) shall take proper care of said real estate and the buildings thereon and neither commit waste nor allow waste to be committed; nor suffer anything to be done that will impair the value thereof or of the security hereby given, and the Mortgagor(s) shall keep all legal taxes and assessments against said real estate and the buildings thereon paid and keep and pay for fire and extended coverage insurance on said buildings in Insurance Companies approved by the Mortgagee against loss to the amount of \$ 11,640.96, loss if any payable to the Mortgagee as its interests may appear, the policies to be delivered to the Mortgagee; and on failure of the mortgagor(s) to pay such taxes or assessments or to procure such insurance and deliver said policies, the Mortgagee may, at its option, without notice, pay such taxes or assessments, either before or after the same become delinquent, or effect such insurance and the amount paid by the Mortgagee in so doing shall become a part of the debt secured hereby, together with interest thereon at the rate of eight percent, per annum.

THIRD. That upon failure to pay said principal note(s), or any of them at maturity, or upon failure to pay the interest thereon as and when the same becomes due and payable or upon failure to pay the taxes, assessments or insurance as hereinafter provided, or to do and perform any of the other provisions, conditions or agreements of this mortgage on the part of the mortgagor(s) to be performed and fulfilled, then the principal note(s) aforesaid, as well as all interest then in arrear, shall, at the option of the Mortgagee, without notice, become immediately due and payable and this mortgage may then be foreclosed.

That in the event of any default by the Mortgagor(s) hereunder, the Mortgagee shall, from the date of such default and as often as the same may occur, have the right to take possession of the mortgaged premises and to collect the rents, issues and profits therefrom and apply the same toward the payment of said principal note(s) interest and expenses thereon, or if this mortgage shall be foreclosed, shall have the right to have a Receiver appointed to take possession of and collect the rents and profits from the mortgaged premises during foreclosure proceedings and during the period of redemption. In the event of foreclosure, Mortgagee may continue the abstract of title to the Mortgaged Premises, or obtain other appropriate evidence of title or title insurance, and the cost thereof shall be added to the unpaid principal balance secured by this Mortgage.

FOURTH. Upon any default by Mortgagors under this Mortgage or in the payment when due of any amounts under the Note or this Mortgage, or if Mortgagors shall abandon the Mortgaged Premises, or shall be adjudged bankrupt, or if a trustee or receiver shall be appointed for Mortgagors or for any part of the Mortgaged Premises, the entire indebtedness secured hereby shall, at the option of Mortgagee and without notice or demand, become immediately due and payable and this Mortgage may be foreclosed accordingly.

All rights and remedies of Mortgagee hereunder are cumulative and are in addition to and not in limitation of any rights or remedies which Mortgagee may otherwise have by law. No waiver of any default or failure or delay to exercise any right or remedy by Mortgagee shall operate as a waiver of any other default or of the same default in the future or as a waiver of any right or remedy with respect to the same or any other occurrence.

FIFTH. If Mortgagors shall sell, assign or otherwise transfer ownership of the Mortgaged Premises or any part thereof without the prior written consent of Mortgagee, all indebtedness secured by this Mortgage shall, at the option of Mortgagee and without notice or demand, become immediately due and payable.

SIXTH. That all agreements of the Mortgagor or Mortgagors herein recited are made of the benefit of the Mortgagee and any assignee of this mortgage or of the debt aforesaid, or of any part thereof.

SEVENTH. That it is contemplated that the Mortgagee may make future advances to the Mortgagors, in which event this mortgage shall secure the payment of any and all future advances and of any additional amount; provided that at no time shall the total amount owed by the Mortgagors to this Mortgagee and secured by this mortgage from said Mortgagors to said Mortgagee, exceed the sum of \$ _____ and provided further that such future advances are equally secured and to the same extent as the amount originally advanced on the security of this mortgage. Such future advances, with interest thereon, shall be secured by this mortgage when evidenced by promissory notes or other evidence of indebtedness stating that said notes or other evidence of indebtedness are secured hereby. The Mortgagee at its option may accept a renewal note, or notes, at any time for any portion of the indebtedness hereby secured and may extend the time for the payment of any part of said indebtedness without affecting the security of this mortgage in any manner.

This Mortgage shall also secure the payment of any other liabilities, joint, several, direct, indirect, or otherwise, of Mortgagors to the holder of this Mortgage, when evidenced by promissory notes or other evidence of indebtedness stating that said notes or other evidence of indebtedness are secured hereby.

EIGHTH. All rights and obligations of Mortgagors hereunder shall be binding upon their heirs, successors, assigns and legal representatives and shall inure to the benefit of Mortgagee and its successors, assigns and legal representatives.

IN WITNESS WHEREOF, Mortgagors have executed this Mortgage on this 20th day of September, 1991.

Thomas Francisco
Signature
Thomas Francisco
Printed

Signature

Printed

Signature

Printed

Signature

Printed

STATE OF Indiana
COUNTY OF Lake

Document is (INDIVIDUALS OR PARTNERSHIP)

Before me, a Notary Public in and for said County and State, appeared: Thomas Francisco

_____, each of whom, having been duly sworn, acknowledged the execution of the foregoing Mortgage.

Witness my hand and Notarial Seal this 20th day of September, 1991.

County of Residence: Lake
My Commission Expires: May 23, 1994

Maria Rodriguez
Signature
Maria Rodriguez
Printed

STATE OF _____
COUNTY OF _____

SS:

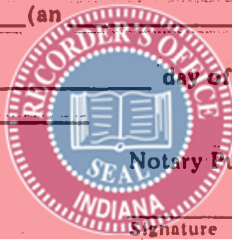
(CORPORATE)

Before me, a Notary Public in and for said County and State, appeared: _____

and _____ respectively as _____ and _____ of _____ (an _____ Corporation) each of whom upon being duly sworn, acknowledged the execution of the foregoing Mortgage.

Witness my hand and Notarial Seal this _____ day of _____, 19 _____.

County of Residence: _____
My Commission Expires: _____



Signature

Printed

This instrument prepared by James Myshevich

RETURN TO
FIRST NATIONAL BANK OF EAST CHICAGO
East Chicago, Indiana

MORTGAGE

TO
FIRST NATIONAL BANK OF EAST CHICAGO

RECEIVED FOR RECORD
the _____ day of _____, 19 _____
at _____ o'clock _____ M., and recorded
in Record _____ Page _____
Recorder of _____ County, Indiana.

INDIANA STATE BOARD OF HEALTH
MEDICAL CERTIFICATE OF DEATH

State No. _____

Local No. **560**

DECEASED—NAME FIRST MIDDLE LAST Reva G. Francisco			SEX Female	DATE OF DEATH—(MONTH DAY YEAR) 8-1-85	
RACE—(a) White (b) Black American Indian (c) Other (Specify)	AGE—(Year, Month, Day) YEARS MONTHS DAYS 71	UNDER 1 YEAR MONTHS DAYS	UNDER 1 DAY HOURS MINUTES	DATE OF BIRTH—(Mo. Day Year) Feb. 23, 1914	COUNTY OF DEATH Lake
CITY, TOWN OR LOCATION OF DEATH Hammond		HOSPITAL OR OTHER INSTITUTION—(Name, if not in other, give street and number) St. Margaret Hospital		IF HOSP OR INST (Specify type) Inpatient	
STATE OF BIRTH—(a) in U.S.A. (name country)	CITIZEN OF WHAT COUNTRY USA	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED, (Specify)	SURVIVING SPOUSE—(a) wife (b) maiden name Thomas		
SOCIAL SECURITY NUMBER 311-20-7515-M	USUAL OCCUPATION—(Give kind of work done during most of past 12 mo. Specify each if varied)	KIND OF BUSINESS OR INDUSTRY Homemaker			
RESIDENCE—STATE Indiana	COUNTY Lake	CITY, TOWN OR LOCATION Gary			
STREET AND NUMBER 2541 W. Oakwood		IS RESIDENCE ON A FARM? 15e YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INSIDE CITY LIMITS (Specify Yes or No) 15i yes		
IS DECEASED OF SPANISH DESCENT? IF YES SPECIFY MEXICAN, CUBAN, PUERTO RICAN, ETC.					
FATHER—NAME FIRST MIDDLE LAST Shirley McDonald		MOTHER—MAIDEN NAME FIRST MIDDLE LAST Marie Seneff			
INFORMANT—NAME (Type or print)	RELATIONSHIP	MAILING ADDRESS (Street or R.F.D. No.)	CITY OR TOWN	STATE ZIP	
Thomas Francisco-Husb.		2541 W. Oakwood	Gary, Indiana	46406	
BURIAL, CREMATION, REMOVAL, OTHER (Specify)	CEMETERY OR CREMATORY—FUNERAL HOME		LOCATION—CITY OR TOWN STATE		
Burial	Gracecland Cemetery		New Albany, Ind.		
DATE (Month, Day, Year) August 5, 1985	FUNERAL HOME—NAME AND ADDRESS (Street or R.F.D. No. City or Town State ZIP) Solan Funeral Home, 7109 Calumet Ave., Hammond, Ind.		HOUR OF DEATH 4:32 p.m.		
NAME OF ATTENDING PHYSICIAN (Type or Print) B.M.F. Palmer, M.D.		DATE SIGNED (Mo., Day Year) 8/1/85	HOUR OF DEATH 4:32 p.m.		
MAILING ADDRESS—PHYSICIAN Box 1278, Hammond, Indiana 46320		DATE RECEIVED BY LOCAL HEALTH OFFICER AUG - 2, 1985			
HEALTH OFFICER—SIGNATURE <i>Mary Solan</i>		DATE RECEIVED BY LOCAL HEALTH OFFICER AUG - 2, 1985			
CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE—STATING THE UNDERLYING CAUSE LAST					
PART I IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a) AND (c))					
(a) Constrictive Heart Failure		Interval between onset and death			
(b) Respiratory Failure		Interval between onset and death			
(c) Pulmonary Congestion and Uncontrolled Diabetes Mellitus		Interval between onset and death			
PART II OTHER SIGNIFICANT CONDITIONS—(Conditions contributing to death but not related to cause given in PART I (a))					
End Stage Arteriosclerotic Heart Disease		AUTOPSY (Specify Yes or No) no			



TYPE OR PRINT PLAINLY WITH UNFADING INK THIS IS A PERMANENT RECORD

Below for State Office Use

THIS CERTIFIES THE ABOVE IS A TRUE AND COMPLETE COPY OF THE CERTIFICATE OF DEATH ON FILE WITH THE HAMMOND HEALTH DEPT. AUG - 2 1985

Mary Solan
HAMMOND HEALTH COMMISSIONER

FUNERAL HOME No. **289**
LICENSE No. **409**
FUNERAL DIRECTOR'S LICENSE No. **849**
EMBALMER'S NAME **Mary Solan**
FUNERAL DIRECTOR'S SIGNATURE *Mary Solan*