

Chicago Title Insurance Company

9305088
93050885

SAISFACTION OF MORTGAGE

This Certifies, That a certain Mortgage executed by ...HELENA.E...BOJDA.....

..... to EDWARD.J...BOJDA, JR...AND KAREN.A.....

...HOLDOSH...as joint tenants and not as tenants in common.....

on ...January 29th... day of19.83...., calling for \$...1,000.00.....and recorded

in ^{Document} Mortgage Record No. 696027....., page Lake..... County.

State of Indiana, has been fully paid and satisfied, and the same is hereby released.

WITNESS hand and seal....., this ...2nd..... day of ...August.....19.93...

Edward J. Bojda, Jr.
EDWARD J. BOJDA, JR.

Document is

NOT OFFICIAL!

State of Indiana, ...LAKE... County, ss:

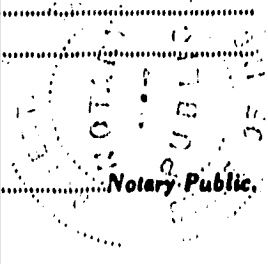
This Document is the property of
Before me, the undersigned, a Notary Public in and for said County, this ...2nd...
day of ...August... 19.93., ...Edward J. Bojda, Jr.....

acknowledged the execution of the annexed satisfaction of mortgage.

Witness my Hand and official seal.

Roberta S. Tate

Roberta S. Tate res. of Porter
My Commission expires ...12-17-93...
Attorney Rudolph M. Zajac, Whiting, Indiana



This instrument prepared by:

Lot 10, Block 9, Sheffield, in the city of Hammond, as shown in plat book 14, page 6,
in Lake County, Indiana.



STATE OF INDIANA/S.S.NO.
LAKE COUNTY
FILED FOR RECORD
AUG 4 1 17 PM '93
SARDEL ORLICH
RECORDER

900
of

MEDICAL CERTIFICATE OF DEATH

62-3387

DEC 13 1991

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

REGISTRATION DISTRICT NO. 16.10
REGISTERED NUMBER

1. DECEASED-NAME: FIRST: Karen, MIDDLE: A., LAST: Holdosh, SEX: 2. Female, DATE OF DEATH: 3. December 11, 1991

4. COUNTY OF DEATH: Cook

5a. AGE-LAST BIRTHDAY (YRS): 58, 47, 5b. UNDER 1 YEAR: 5c. UNDER 1 DAY: 5d. DATE OF BIRTH: October 2, 1944

6a. CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER: Chicago, 6b. Hospital or other institution: Humana Hospital-Michael Reese, 6c. Inpatient

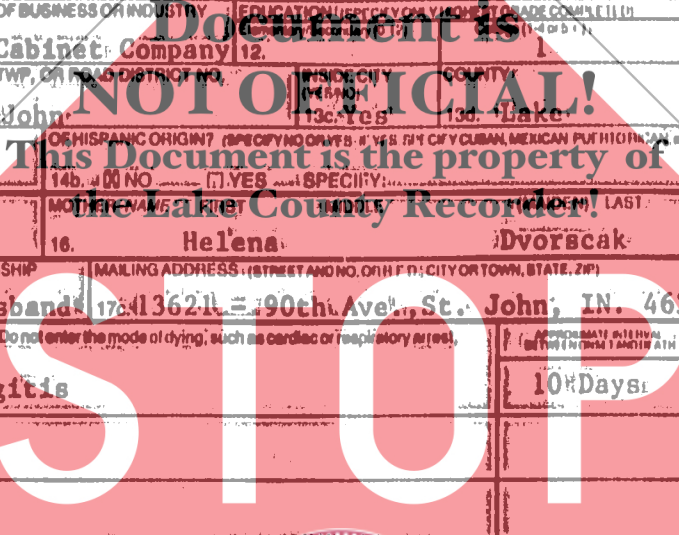
7. BIRTHPLACE: Chicago, IL, 8a. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: Married, 8b. NAME OF SURVIVING SPOUSE: Stephen J. Holdosh, Jr., 8c. KIND OF BUSINESS OR INDUSTRY: Cabinet Company

9. SOCIAL SECURITY NUMBER: 303-46-6470, 11a. Office Manager, 11b. Cabinet Company

13a. RESIDENCE: 13621 90th Avenue, St. John, Indiana, 13b. St. John, IN, 13c. Lake

14. RACE: White

15. INFORMANT'S NAME: Edward Bojda, RELATIONSHIP: Husband, 16. Mailing Address: Helena Dvorscak, 13621 90th Ave., St. John, IN, 46373



17. PART I. Immediate Cause (Final disease or condition resulting in death): Pneumococcal Meningitis

18. PART II. Underlying Cause (Cause of death): Breast Carcinoma

19. DATE OF OPERATION: 20b. MAJOR FINDINGS OF OPERATION

21. (1) DID NOT ATTEND THE DECEASED AND LAST SAW HIM HER ALIVE ON: December 11, 1991

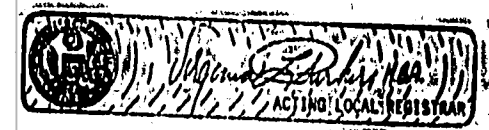
22a. SIGNATURE: Rosalind Catchatourian, M.D., 22b. December 12, 1991

23. FUNERAL CREMATION REMOVAL (SPECIFY): Burial, 24a. Calumet Park, 24c. Merrillville, Indiana, 24d. Dec. 14, 1991

25a. FUNERAL DIRECTOR'S SIGNATURE: Paul A. Jacobs, 25c. 34-010821

26a. LOCAL REGISTRAR'S SIGNATURE: Virginia L. Parker, M.P.A., 26b. DEC 13 1991

I, VIRGINIA L. PARKER, M.P.A. ACTING LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO; THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.



THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

Lot 10, Block 9, Sheffield Blvd. in the City of Chicago, page 67 in Lake Co. Ind.

DEPARTMENT OF HEALTH - CITY OF CHICAGO