

FILED FOR RECORD

2005 050987

2005 JUN 01 10:11 AM

NOTARY PUBLIC RECORD

AFFIDAVIT

I, Jacob M. Yonkman, being duly sworn upon oath, do hereby state and affirm that the documents attached hereto consisting of an Affidavit, a Copy of Letters of Administration, a Death Certificate and an Entry of Appearance, Consent and Receipt in Full Satisfaction of Distributive Share were presented to me as matters to support the title of Lake County Trust Company as Trustee under the provisions of a Trust Agreement dated August 14, 1973, known as Trust No. 2017.

J. M. Yonkman

Jacob M. Yonkman

State of Indiana
County of Lake

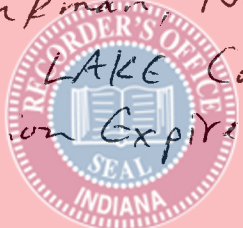
SS

Document is NOT OFFICIAL!
This Document is the property of the Lake County Recorder!

Subscribed and sworn to before me, a Notary Public, in and for said County and State this
14th day of June, 2005.

Joseph M. Yonkman

Joseph M. Yonkman, Notary Public
Resident of LAKE County
My Commission Expires: September 3, 2011



Stewart Title Services
of Northwest Indiana
The Pointe
5521 W. Lincoln Hwy.
Crown Point, IN 46307

FILED

JUN 21 2005

STEPHEN R. STIGLITZ
LAKE COUNTY AUDITOR

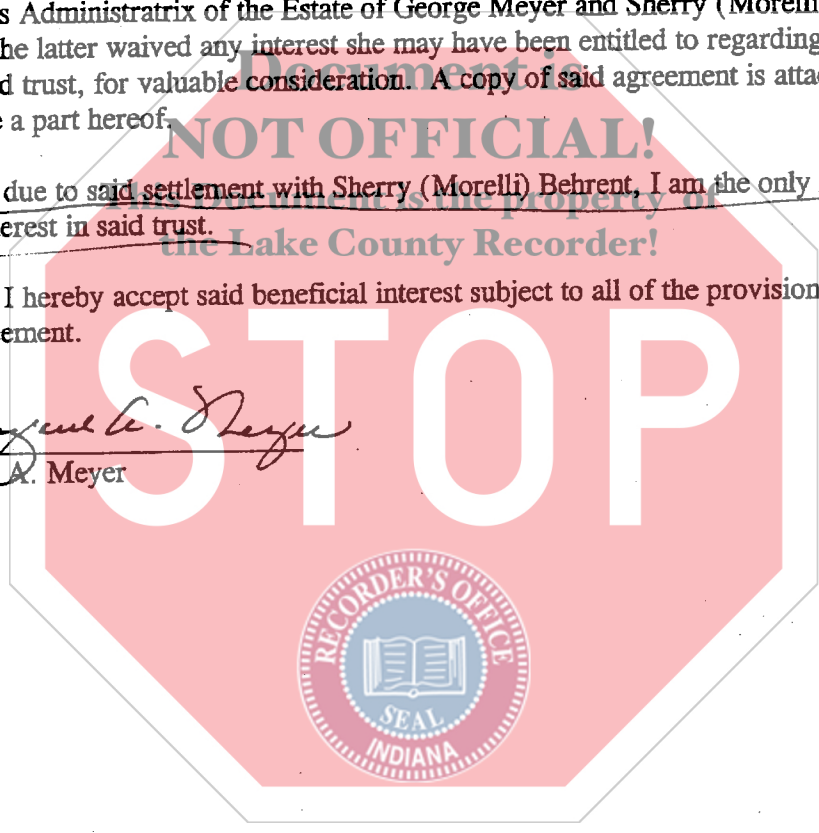
21/05
STS
01701

AFFIDAVIT

I, Margaret A. Meyer, do hereby state:

1. That I am the surviving spouse of George Meyer who died intestate on December 25, 1988.
2. That the sole heirs of George Meyer are: myself, Margaret A. Meyer, and Sherry (Morelli) Behrent.
3. That during his life, George Meyer owned the beneficial interest in Lake County Trust No. 2017.
4. That following the death of George Meyer, a settlement was entered into between myself, as Administratrix of the Estate of George Meyer and Sherry (Morelli) Behrent, wherein the latter waived any interest she may have been entitled to regarding the above-referenced trust, for valuable consideration. A copy of said agreement is attached hereto and made a part hereof.
5. That due to said settlement with Sherry (Morelli) Behrent, I am the only heir entitled to any interest in said trust.
6. That I hereby accept said beneficial interest subject to all of the provisions of said trust agreement.


Margaret A. Meyer



AFFIDAVIT

I, Margaret A. Meyer, do hereby state:

1. That I am the surviving spouse of George Meyer who died intestate on December 25, 1988.
2. That the sole heirs of George Meyer are: myself, Margaret A. Meyer, and Sherry (Morelli) Behrent.
3. That during his life, George Meyer owned the beneficial interest in Lake County Trust No. 2017.
4. That following the death of George Meyer, a settlement was entered into between myself, as Administratrix of the Estate of George Meyer and Sherry (Morelli) Behrent, wherein the latter waived any interest she may have been entitled to regarding the above-referenced trust, for valuable consideration. A copy of said agreement is attached hereto and made a part hereof.
5. That due to said settlement with Sherry (Morelli) Behrent, I am the only heir entitled to any interest in said trust.
6. That I hereby accept said beneficial interest subject to all of the provisions of said trust agreement.


Margaret A. Meyer



APR 28 1989

LETTERS OF OFFICE- DECEDENT'S ESTATE

(Rev. 4-88) CCP-415

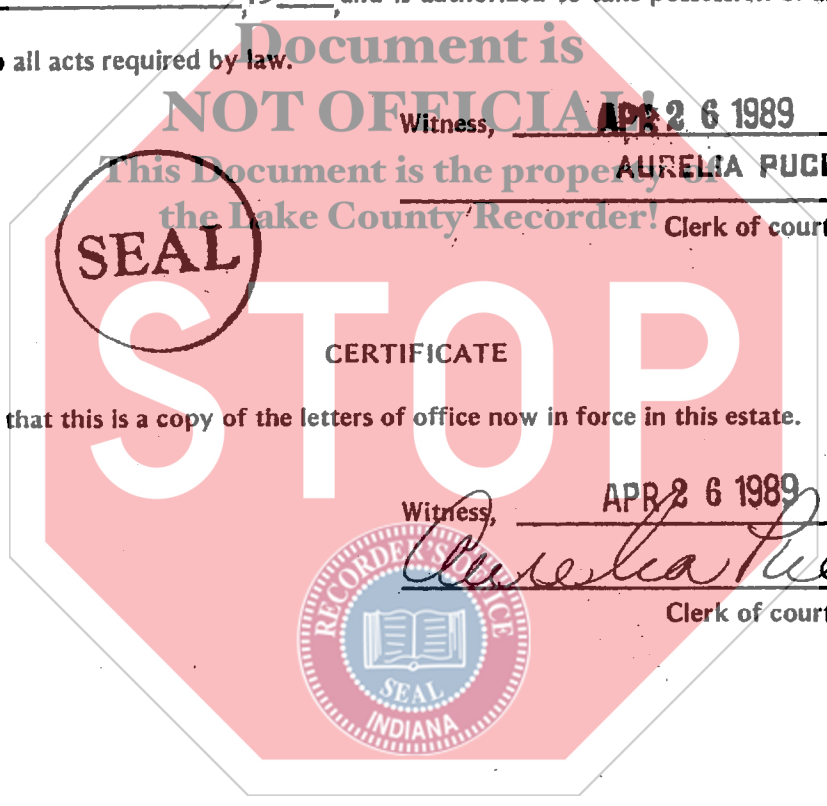
ORIGINAL

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
County Department, Probate Division

Estate of	No.	89 P 3131
GEORGE C. MEYER	Docket	956
Deceased	Page	474

LETTERS OF OFFICE-DECEDENT'S ESTATE

Margaret A. Meyer has been appointed
Independent Administrator of the estate of
George C. Meyer, deceased,
 who died December 25, 1988, and is authorized to take possession of and collect the estate of
 the decedent and to do all acts required by law.



Witness, APR 26 1989, 19
AURELIA PUCINSKI
 Clerk of court

I certify that this is a copy of the letters of office now in force in this estate.

Witness, APR 26 1989, 19
Aurelia Pucinski
 Clerk of court

vb

CLERK OF THE CIRCUIT COURT OF COOK COUNTY

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death 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 December 30, 1988 SIGNED Evelyn A. Kersten
 Official Title Chief Deputy Registrar

At Cook County Department of Public Health
 1500 S. Maybrook Drive - Maywood, Illinois 60153

STATE OF ILLINOIS
 MEDICAL CERTIFICATE OF DEATH
 STATE FILE NUMBER

REGISTRATION DISTRICT NO. 760
 REGISTERED NUMBER

DECEASED - NAME: GEORGE CONRAD MEYER
 SEX: MALE
 DATE OF DEATH - MONTH, DAY, YEAR: DECEMBER 25, 1988

RACE - (WHITE, BLACK, AMERICAN INDIAN, PACIFIC ISLANDER)
White
 ORIGIN OR DESCENT: German
 AGE - LAST BIRTHDAY (YRS, MOS, DYS): 67
 UNDER 1 YEAR: 0 1 YEAR: 0 1 DAY: 0
 DATE OF BIRTH - MO, DAY, YEAR: June 15, 1921
 COUNTY OF DEATH: Cook

CITY, TOWN, TWP OR ROAD DISTRICT NUMBER: Olympia Fields
 HOSPITAL OR OTHER INSTITUTION - NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER): Olympia Fields Osteopathic Medical Ctr 1209 Golf View Ln.
 NAME OF SURVIVING SPOUSE - (MARRIED NAME IF WIFE): Margaret Rakestraw

STATE OF BIRTH - (IF NOT U.S.A. NAME COUNTRY): Illinois
 CITIZEN OF WHAT COUNTRY: U.S.A.
 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY): Married
 SOCIAL SECURITY NUMBER: 349-12-3750
 USUAL OCCUPATION: Self-Employed
 KIND OF BUSINESS OR INDUSTRY: Pallet Mfg. Co.
 WAS DECEASED EVER IN U.S. ARMED FORCES? YES / NO: Yes
 WAR OR DATES OF SERVICE: WWII

RESIDENCE - STREET AND NUMBER: 1209 Golf View Ln.
 CITY, TOWN, TWP OR ROAD DISTRICT NO.: Flossmoor
 COUNTY: Cook
 STATE: Illinois

FATHER - NAME: John Meyer
 MOTHER - MAIDEN NAME: Enita Hacker

15. INFORMANT NAME (TYPE OR PRINT): Margaret Meyer
 RELATIONSHIP: Wife
 MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP): 1209 Golf View Ln., Flossmoor, IL 60422

16. DEATH WAS CAUSED BY:
 IMMEDIATE CAUSE: Cardiogenic Shock
 DUE TO OR AS A CONSEQUENCE OF: acute myocardial infarction
 DUE TO OR AS A CONSEQUENCE OF: Coronary Artery Disease

17. CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (A) STATING THE UNDERLYING CAUSE LAST:
 (a) Cardiogenic Shock
 (b) acute myocardial infarction
 (c) Coronary Artery Disease

18. PART II. OTHER SIGNIFICANT CONDITIONS: (CONDITIONS CONTRIBUTING TO DEATH BUT NOT BELIEVED TO CAUSE DEATH) (PART I): None

19. DATE OF OPERATION, IF ANY: None
 MAJOR FINDINGS OF OPERATION: None

20. I DID NOT ATTEND THE DECEASED AND LAST SAW HIM/HER ALIVE ON: 12-25-88
 MONTH, DAY, YEAR

21. TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE TIME, PLACE AND DUE TO THE CAUSE(S) STATED: Yes

22. SIGNATURE: Gary Macoste
 NAME AND ADDRESS OF CERTIFIER: 195B main st. Oite Ill.

23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER: None

24. WAS CORONER OR MEDICAL EXAMINER NOTIFIED? YES / NO: Yes
 HOUR OR DATE OF DEATH: 1:35 A
 DATE SIGNED - MONTH, DAY, YEAR: 12-28-88
 ILLINOIS LICENSE NUMBER: 36057151

25. BURIAL, CREMATION, REMOVAL (SPECIFY): Burial
 CEMETERY OR CREMATORY - NAME: Woodlawn Memorial
 26. FUNERAL HOME: Carlson Funeral Home, Ltd.
 27. CITY OR TOWN: Joliet, Illinois
 STATE: Illinois
 DATE: Dec. 28, 1988
 MONTH, DAY, YEAR

28. FUNERAL DIRECTOR'S SIGNATURE: Robert L. Amyes
 NAME: Robert L. Amyes
 CITY OR TOWN: Joliet, Illinois
 STATE: Illinois
 DATE: 31-7243
 MONTH, DAY, YEAR

29. LOCAL REGISTRAR'S SIGNATURE: Evelyn A. Kersten
 NAME: Evelyn A. Kersten
 CITY OR TOWN: Joliet, Illinois
 STATE: Illinois
 DATE: Dec. 28, 1988
 MONTH, DAY, YEAR

VER200 REV. 5/82
 Illinois Department of Public Health - Office of Vital Records
 BASED ON 1978 U.S. STANDARD CERTIFICATE

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
PROBATE DIVISION

IN RE THE ESTATE OF:)
)
GEORGE C. MEYER) General No. 89 P 03131
)
Deceased)

ENTRY OF APPEARANCE, CONSENT AND RECEIPT
IN FULL SATISFACTION OF DISTRIBUTIVE SHARE

I, Sherry Lynn Morelli, an adult and under no disability, and a beneficiary of one-half (½) of the residuary estate of the decedent, hereby acknowledge receipt of the First and Final Account of Margaret A. Meyer, administrator of the estate. I hereby enter my appearance in the matter of its approval, waive all notice and approve the said First and Final Account and acquit, release and discharge the said Margaret A. Meyer. I hereby consent to the entry of an order approving the First and Final Account, discharging the representative and declaring the estate fully settled and closed and to the allowance and payment of fees to the representative and to the attorneys for the estate as shown therein.

I hereby acknowledge the receipt of my full distributive share of the estate. In consideration of the delivery of said share, I hereby warrant and represent that I am the person entitled to receive the same and hereby acquit, release and discharge the said Margaret A. Meyer from any further liability.

This instrument shall be binding upon me, my heirs, assigns and legal representatives, and shall inure to the benefit of the

estate of George C. Meyer, deceased, said Margaret A. Meyer, administrator, and her successors.

DATED: April 17, 1991.

Sherry Lynn Morelli
Sherry Lynn Morelli

STATE OF ILLINOIS)
) SS.
COUNTY OF KANE)

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that Sherry Lynn Morelli, who is personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she signed, sealed and delivered the said instrument as her own free and voluntary act, for the uses and purposes herein set forth.

Given under my hand and notarial seal, this 17th day of April A.D. 1991.

Kimberly D. Durbin
Notary Public

"OFFICIAL SEAL"
KIMBERLY D. DURBIN
Notary Public, State of Illinois
My Commission Expires 9/1/91

