



UNOFFICIAL COPY 00157914

1810/0012 28 001 Page 1 of 4
2000-03-03 11:01:40
Cook County Recorder 27.50



Release Deed

This Instrument was
PREPARED BY:
Greg Kasprzyk
171 N. Clark Street
Chicago, Il. 60601-3294

SEE BACK
DED CALL

KNOW ALL MEN BY THESE PRESENTS, That, CHICAGO TITLE LAND TRUST COMPANY a corporation of the State of Illinois, as Trustee (or as successor trustee to all prior assignees) in consideration of one dollar, and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby release, convey and quit-claim unto **MOHAMMAD J. SADDIQ AND BILQUIS SADDIQ, HUSBAND & WIFE**, , the heirs, legal representatives and assigns of the grantee or grantees herein, (or if the grantee is a corporation, its successors and assigns) all the right, title, interest, claim or demand whatsoever it may have acquired in, through or by a certain Trust Deed, recorded (or registered) in the Recorder's Office of, **COOK** County, in the State of Illinois, as Document Number **95 153 234** , to the premises situated in the said County, State of Illinois, described as follows, to-wit:

SEE LEGAL DESCRIPTION ATTACHED AS EXHIBIT "A"

together with all the appurtenances and privileges thereunto belonging or appertaining.

**FOR THE PROTECTION OF THE OWNER, THIS
RELEASE SHALL BE FILED WITH THE
RECORDER OF DEED IN WHOSE OFFICE THE
MORTGAGE OR DEED OF TRUST WAS FILED.**

PIN: 13-29-103-019-0000/13-29-103-020-0000

PROPERTY ADDRESS: 6007-6011 W. BELMONT , CHICAGO, IL

[] MAIL TO:

NAME

THOMAS F. SHERO

STREET

4752 NORTH PULASKI ROAD

CITY

CHICAGO, IL 60630 [] RECORDER'S OFFICE BOX NUMBER 333



UNOFFICIAL COPY 00157914 Page 2 of 4
CHICAGO TITLE LAND TRUST COMPANY

IN WITNESS WHEREOF, Said CHICAGO TITLE LAND TRUST COMPANY, as Trustee as aforesaid, has caused these presents to be signed by its Assistant Vice-President, and attested by its Assistant Secretary, and its corporate seal to be hereto affixed.

CHICAGO TITLE LAND TRUST COMPANY
as Trustee as aforesaid.

(Date) FEB 03 2000



By *[Signature]*
Attest *[Signature]*

Assistant Vice-President

Assistant Secretary

STATE OF ILLINOIS,

SS.

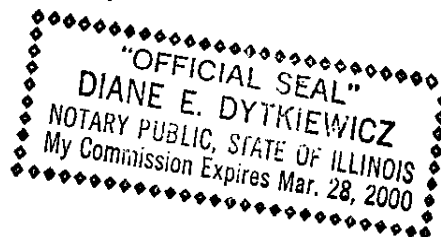
COUNTY OF COOK

I, the undersigned, a Notary Public in and for the County and State aforesaid, DO HEREBY CERTIFY, that the above named Assistant Vice-President and Assistant Secretary of the, CHICAGO TITLE LAND TRUST COMPANY, Grantor, or as Attorney in fact for all prior assignees, personally known to me to be the same persons whose names are subscribed to the foregoing instrument as such Assistant Vice-President and Assistant Secretary respectively, appeared before me this day in person and acknowledged that they signed and delivered the said instrument as their own free and voluntary act and as the free and voluntary act of said Company for the uses and purposes therein set forth; and the said Assistant Secretary then and there acknowledged that said Assistant Secretary, as custodian of the corporate seal of said Company, caused the corporate seal of said Company to be affixed to said instrument as said Assistant Secretary's own free and voluntary act and as the free and voluntary act of said Company for the uses and purposes therein set forth.

Given under my hand and Notarial Seal

Date FEB 03 2000

Notary Public *[Signature]*



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EXHIBI "A"
LEGAL DESCRIPTION
RE: 95 153 234

LOTS 2 AND 3 IN BLOCK 1 IN JAVORAS AND JOHNSON'S WESTFIELD
MANOR, A SUBDIVISION OF THE EAST $\frac{1}{2}$ OF THE NORTHEAST $\frac{1}{4}$ OF THE
NORTHWEST $\frac{1}{4}$ OF SECTION 29, TOWNSHIP 40 NORTH, RANGE 13, EAST OF
THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

REGISTRATION
DISTRICT NO. 1610

STATE OF ILLINOIS

STATE FILE
NUMBER

60034

MEDICAL CERTIFICATE OF DEATH

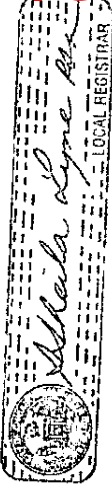
REGISTERED
NUMBER

DECEASED-NAME 1. SPERO	FIRST MIDDLE LAST PALLADINO	SEX 2. MALE	DATE OF DEATH (MONTH, DAY, YEAR) 3. JANUARY 2, 1998
COUNTY OF DEATH 4. COOK	AGE-LAST BIRTHDAY 5a. 70	UNDER 1 YEAR WOS. 5b. 70 DAYS 5c. 70 HOURS 5d. 70 MIN. 5e. 70	DATE OF BIRTH (MONTH, DAY, YEAR) 5f. MAY 15, 1927
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER 6a. CHICAGO	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) 6b. ST. JOSEPH HOSPITAL		
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) 7. GREECE	NAME OF SURVIVING SPOUSE (MARRIED NAME, IF WIFE) 8b. BARBARA KANDRIS		
SOCIAL SECURITY NUMBER 10. 360 26 4977	KIND OF BUSINESS OR INDUSTRY 11b. OWNER		
RESIDENCE (STREET AND NUMBER) 13a. 7110 W. AGATITE	CITY, TOWN, TWP. OR ROAD DISTRICT NO. 13b. NORRIDGE		
STATE 13a. ILLINOIS	RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) 14a. WHITE		
FATHER-NAME 15. DANIEL	FIRST MIDDLE LAST PALLADINO	MOTHER-NAME 16. DEMETRA	DATE OF BIRTH (MONTH, DAY, YEAR) 17c. 7110 W. AGATITE, NORRIDGE, ILLINOIS
INFORMANT'S NAME (TYPE OR PRINT) 17a. BARBARA PALLADINO			
RELATIONSHIP 17b. WIFE			
MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 17c. 7110 W. AGATITE, NORRIDGE, ILLINOIS			
18. PART I: Enter the diseases, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest. Immediate Cause (Final disease or condition resulting in death) (a) Malignant Fibrosarcoma of the Lower Limb, CONSEQUENCE OF (b) DUE TO, OR AS A CONSEQUENCE OF (c) DUE TO, OR AS A CONSEQUENCE OF			
PART II: Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.			
DATE OF OPERATION, IF ANY 20a. 1-1-98			
MAJOR FINDINGS OF OPERATION 20b. 1-1-98			
WAS CORONER OR MEDICAL EXAMINER NOTIFIED? (YES/NO) 21b. NO			
HOUR OF DEATH 21c. 5:45 A.M.			
DATE SIGNED (MONTH, DAY, YEAR) 22b. 1-2-98			
ILLINOIS LICENSE NUMBER 22d. 36-33100			
NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH, THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.			
23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT) 23a. SIGNATURE: John B. Watson, M.D. 23b. 2800 N. Sheridan Rd. #600 Chicago, Ill. 60657			
BURIAL, CREMATION, REMOVAL (SPECIFY) 24a. BURIAL			
CEMETERY OR CREMATORY-NAME 24b. ELWOOD CEMETERY			
LOCATION 24c. RIVER GROVE, ILLINOIS			
CITY OR TOWN 24d. RIVER GROVE, ILLINOIS			
STATE 24e. ILLINOIS			
ZIP 24f. 60656			
FUNERAL HOME 25a. CUMBERLAND CHAPELS			
STREET AND NUMBER OR R.F.D. 25b. 2800 N. Sheridan Rd. #600 Chicago, Ill. 60657			
FUNDING DIRECTOR'S SIGNATURE 25c. 031-007151			
DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) 25d. JAN - 5 1998			
LOCAL REGISTRAR'S SIGNATURE 25e. Sheila Lynne Rasmussen			
DATE 25f. JAN - 5 1998			
26a. 26b.			

STATE OF ILLINOIS
COUNTY OF COOK
CITY OF CHICAGO

JAN - 5 1998

I, SHEILA LYNNE, RSM, 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.



00157914

Page 4 of 4

THIS CERTIFIED COPY VALID WHEN
MULTICOLOR OR SIGNATURE SEAL IS
AFFIXED.