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GEORGE E. COLE® No. 822 REC
LEGAL FORMS December 1999

7100/0012 90 002 Page 1 of 5
2002-09-17 12:34:51
Cook County Recorder 32.50

QUIT CLAIM DEED
Statutory (Illinois)
(Individual to Individual)

COOK COUNTY
RECORDED
EUGENE "GENE" HOOKER
BRIDGEVIEW OFFICE



CAUTION: Consult a lawyer before using or acting under this form. Neither the publisher nor the seller of this form makes any warranty with respect thereto, including any warranty of merchantability or fitness for a particular purpose.

THE GRANTOR(S) JAMES VALENTINO, Above Space for Recorder's use only
a widow, and not remarried

of the City Village of Oak Lawn County of Cook State of Illinois for the
consideration of TEN (\$10.00) DOLLARS and 00/100-----DOLLARS, and other good and valuable
considerations _____ in hand paid, CONVEY(S) _____ and QUIT CLAIM(S)

TO JAMES VALENTINO 7100 W. 95th St. Oak Lawn, IL and ANTOINETTE VALENTINO
as joint tenants and not as _____ (Name and Address of Grantees) _____
tenants in common _____ 60610

all interest in the following described Real Estate, the real estate situated in _____ Cook County, Illinois,
commonly known as 7100 W. 95th St. #315 Oak Lawn, IL 60453, (st. address) legally described as:

SEE ATTACHED LEGAL DESCRIPTION

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

Permanent Real Estate Index Number(s): 24063010451042

Address(es) of Real Estate: 7100 W. 95th Street Unit 315 Oak Lawn, IL 60453

DATED this: 16 day of Sept. 2002

Please print or type name(s) below signature(s)
James Valentino (SEAL) _____ (SEAL)
JAMES VALENTINO

(SEAL) _____ (SEAL)

State of Illinois, County of Cook ss. I, the undersigned, a Notary Public in and for said County,
in the State aforesaid, DO HEREBY CERTIFY that
JAMES VALENTINO

IMPRESS OFFICIAL SEAL BETH RE COLLINS
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 09/24/06
I am personally known to me to be the same person _____ whose name _____ subscribed to the
forgoing instrument, appeared before me this day in person, and acknowledged that _____ he
signed, sealed and delivered the said instrument as _____ his _____ free and voluntary act, for the
and purposes therein set forth, including the release and waiver of the right of homestead.

Quit Claim Deed

INDIVIDUAL TO INDIVIDUAL

JAMES VALENTINO

TO

JAMES VALENTINO and

ANTOINETTE VALENTINO

GEORGE E. COLE®
LEGAL FORMS

Property of Cook County

Exempt under Real Estate Transfer Tax Law 35 ILCS 200/31-45
sub par. 5 and Cook County Ord. 93-0-27 par. 4

Date 9/17/02 Sign James Valentino

Given under my hand and official seal, this 16th day of SEPTEMBER 2002

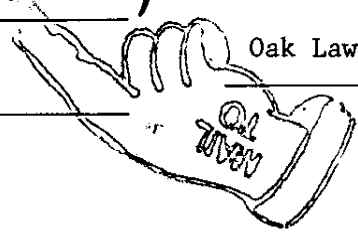
Commission expires SEPTEMBER 24 2005 Debra P. Collins
NOTARY PUBLIC

This instrument was prepared by JOHN J. COLLINS, LTD. 1347 N. La Salle St. Chicago, IL 60602
(Name and Address)

MAIL TO: { James Valentino
(Name)
7100 W. 95th St. #315
(Address)
Oak Lawn, IL 60453
(City, State and Zip)

SEND SUBSEQUENT TAX BILLS TO:
James Valentino
(Name)
7100 W. 95th St. #315
(Address)
Oak Lawn, IL 60453
(City, State and Zip)

OR RECORDER'S OFFICE BOX NO. _____ (City, State and Zip)



Unit Number 315 as delineated on the survey of the following described parcel of real estate:
Lot 1 in Cago Development, 95th Street and Nottingham Avenue Subdivision of part of the South West 1/4 of the South West 1/4 of Section 6, Township 37 North, Range 13 East of the Third Principal Meridian, in Cook County, Illinois, which survey is attached as Exhibit "A" to the Declaration made by the 1st National Bank of Evergreen Park as Trustee under Trust Number 2577 recorded in the Office of the Recorder of Deeds, Cook County, Illinois as Document Number 22788882 and as amended by Document Number 23195445; together with its undivided percentage interest in the common elements as set forth in said Declaration, all in Cook County, Illinois.**

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COOK COUNTY CLERK'S OFFICE
JAN 1 2011

MEDICAL CERTIFICATE OF DEATH

NUMBER

STATE OF ILLINOIS

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 filled in my office in accordance with the provisions of the Illinois statutes relating to the registration of births, stillbirths and deaths.

Date July 20, 2001

Signed *Josephine Dank*
 At Cook County Department of Public Health Official Title Chief Deputy Registrar,
 1010 Lake Street, Oak Park, Illinois 60301

REGISTERED DISTRICT NO 6.0	DECEASED-NAME CONNIE VALENTINO COOK	MIDDLE VALENTINO	LAST VALENTINO	SEX 2. FEMALE	DATE OF DEATH (MONTH, DAY, YEAR) JULY 18, 2001
COUNTY OF DEATH COOK	AGE-LAST BIRTHDAY (YRS) 85	UNDER 1 YEAR DAYS	UNDER 1 DAY HOURS MIN.	DATE OF BIRTH (MONTH, DAY, YEAR) AUGUST 4, 1915	
CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER OAK LAWN	HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) 7100 W 95 TH STREET	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) JAMES	DATE OF BIRTH (MONTH, DAY, YEAR) AUGUST 4, 1915	IF HCSP, OR INST, INDICATE D.O.A., OPIWER, RM, INPATIENT (SPECIFY)	WAS DECEASED EVER IN US ARMED FORCES? (YES NO) NO
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) CHICAGO IL	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) MARRIED	KIND OF BUSINESS OR INDUSTRY HOMEMAKER	EDUCATION (SPECIFY ONLY HIGH SCHOOL GRADE COMPLETED) College (1-4 or 5+) 4		
SOCIAL SECURITY NUMBER 320-07-8613	USUAL OCCUPATION HOMEMAKER	CITY, TOWN, TWP, OR ROAD DISTRICT NO. OAK LAWN	INSIDE CITY (YES/NO) YES	COUNTY COOK	
STATE ILLINOIS	RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY) WHITE	13b. OAK LAWN	13c. YES	13d. COOK	
FATHER-NAME JOSEPH SABELLA	MOTHER-NAME ANGELINA TARALLO	14b. <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	14c. SPECIFY: FIRST MIDDLE LAST	(MAIDEN) LAST	
INFORMANT'S NAME (TYPE OR PRINT) JAMES VALENTINO	RELATIONSHIP HUSBAND	16. MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 7100 W 95 TH ST OAK LAWN ILLINOIS	17. HUSBAND	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, shock, or hemorrhage. List only one cause on each line. (a) Immediate Cause (Final disease or condition resulting in death) Conservative heart failure (b) WHICH GIVE RISE TO IMMEDIATE CAUSE (a) myocardial infarction (c) DUE TO, OR AS A CONSEQUENCE OF Old myocardial infarction	19a. AUTOPSY (YES/NO) NO 19b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (YES/NO) NO
DATE OF OPERATION, IF ANY	MAJOR FINDINGS OF OPERATION	20b. (DD) (OR PRET) ATTEND THE DECEASED (MONTH, DAY, YEAR) AND LAST SAW HIM HER ALIVE ON 7-15-01	20c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	21c. HOUR OF DEATH 11:29 P. M.	IF FEMALE, WAS THERE A PREGNANCY IN PAST THREE MONTHS?
21a. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSE(S) STATED. Hosp. of. Good	22a. SIGNATURE Josephine Dank	21b. EXAMINER'S (YES/NO) NO	21c. DATE SIGNED (MONTH, DAY, YEAR) 7-18-01	22b. ILLINOIS LICENSE NUMBER 3642050	NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.
22c. NAME OF ATTENDING PHYSICIAN (OTHER THAN CERTIFIER) (TYPE OR PRINT)	23. BURL, CREMATION, REMOVAL (SPECIFY) ENTOMBMENT	24b. HOLY SEPULCHRE	24c. WORTH ILLINOIS	24d. DATE (MONTH, DAY, YEAR) JULY 23, 2001	
25. FUNERAL HOME HOMPSON & KUENSTER FUNERAL HOME 5570 W 95 OAK LAWN ILLINOIS 60453	25b. FUNERAL DIRECTOR'S SIGNATURE <i>Robert H. Kuenster</i>	25c. FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034-011257	25d. DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) JUL 20 2001	25e. LOCAL REGISTRAR'S SIGNATURE <i>Josephine Dank</i>	25f. LOCAL REGISTRAR'S ILLINOIS LICENSE NUMBER 26b. DATE OF CERTIFICATE



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EUGENE "GENE" MOORE

RECORDER OF DEEDS / REGISTRAR OF TORRENS TITLES
COOK COUNTY, ILLINOIS

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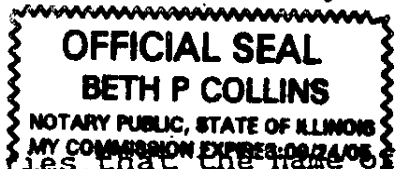
STATEMENT BY GRANTOR AND GRANTEE

The Grantor or his Agent affirms that, to the best of his knowledge, the name of the Grantee shown on the Deed or Assignment of Beneficial Interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire title to real estate under the laws of the State of Illinois.

Dated 9/16/02, 2002

Signature: James Valentino
Grantor or Agent

Subscribed and sworn to before me
by the said JAMES VALENTINO
this 16th day of September, 2002
Notary Public Beth P. Collins



The Grantee or his Agent affirms and verifies that the name of the Grantee shown on the Deed or Assignment of Beneficial Interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire and hold title to real estate under the laws of the State of Illinois.

Dated 9/16, 2002

Signature: Antoinette B. Valentino
Grantee or Agent

Subscribed and sworn to before me
by the said ANTOINETTE VALENTINO
this 16th day of September, 2002
Notary Public Beth P. Collins



NOTE: Any person who knowingly submits a false statement concerning the identity of a Grantee shall be guilty of a Class C misdemeanor for the first offense and of a Class A misdemeanor for subsequent offenses.

(Attach to Deed or ABI to be recorded in Cook County, Illinois, if exempt under the provisions of Section 4 of the Illinois Real Estate Transfer Tax Act.)