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Doc#: 0425147253 Eugene "Gene" Moore Fee: \$28.00 Cook County Recorder of Deeds Date: 09/07/2004 03:49 PM Pg: 1 of 3

QUIT CLAIM DEED Statutory (ILLINOIS) (General)

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THE GRANTOR (NAME AND ADDRESS)

BARBARA A. RHODES 9520 SO. OGLESBY CHICAGO, IL 60617

(The Above Space For Recorder's Use Only)

of the August 30, 2004 of COOK County of United States of America, State of Illinois for and in consideration of \_\_\_\_\_ DOLLARS, in hand paid, CONVEY and QUIT CLAIM to

CATHERINE TOWN 10358 SO STATE STREET CHICAGO, IL 60628

(NAME AND ADDRESS OF GRANTEE(S))

all interest in the following described Real Estate situated in the County of COOK in the State of Illinois, to wit: (See reverse side for legal description.) hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

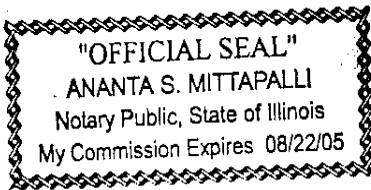
Legal on back

Permanent Index Number (PIN): 25-16-205-030-0000 Address(es) of Real Estate: 10358 SO. STATE CHICAGO, IL 60628

DATED this 30th day of August 2004

PLEASE PRINT OR TYPE NAME(S) BELOW SIGNATURE(S) BARBARA A. RHODES (SEAL) Barbara A. Rhodes (SEAL)

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



IMPRESS SEAL HERE

personally known to me to be the same person whose name subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that h signed, sealed and delivered the said instrument as free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

Given under my hand and official seal, this 30th day of AUGUST 20 04

Commission expires 08-22-2005 Ananta S. Mittapalli NOTARY PUBLIC

This instrument was prepared by BARBARA A. RHODES 9520 SO Ogleby Chicago, IL 60617 (NAME AND ADDRESS)

# UNOFFICIAL COPY

## Legal Description

of premises commonly known as \_\_\_\_\_

Lot 10  
 School Trustees Sub SubLT 8  
 Section 16  
 Township 37  
 Range 14

Property of Cook County Clerk's Office

SEND SUBSEQUENT TAX BILLS TO:

MAIL TO:

\_\_\_\_\_  
 (Name)  
 \_\_\_\_\_  
 (Address)  
 \_\_\_\_\_  
 (City, State and Zip)

\_\_\_\_\_  
 (Name)  
 \_\_\_\_\_  
 (Address)  
 \_\_\_\_\_  
 (City, State and Zip)

OR

RECORDER'S OFFICE BOX NO. \_\_\_\_\_

