

## **UNOFFICIAL COPY**



TITLE OF ILLIN LABELLE SIFES! BUILE 626 0400, IL 60602

MAIL TO:

Emmanuel Anning

7935 South Dobson Avenue

Chicago, Illinois 60619

NAME & ADDRESS OF TAXPAYER:

Emmanuel Anting

7935 South Dobt or Avenue

Chicago, Illinois 60619



Doc#: 0801405258 Fee: \$28.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds
Date: 01/14/2008 02:32 PM Pg: 1 of 3

THE GRANTOR(S) <u>Vivianne Acheampong</u>, single never married, of the <u>city</u> of <u>Chicago</u> County of <u>Cook</u>, State of Illinois for and in consideration of <u>ten</u> DOLLARS and other considerations in hand paid, CONVEY(S) AND WARKANT(S) to <u>Emmanuel Anning</u>, the following described real estate situated in the County of <u>Cook</u>, in the State of Illinois, to wit:

See Attached

NOTE: If additional space is required for legal - attache on separate 8 ½ x 11" sheet with minimum of 1/2" crean margin on all sides

hereby releasing and waiving all rights under and by virtue of Homestead Exemption Laws of the State of Illinois. TO HAVE AND TO HOLD said premises

Permanent Index Number(s): 20-35-105-052-0000

Property Address: 7935 South Dobson Avenue, Chicago, IL 60619

Dated this 21st day of December, 2007

Manjang (Seal)

(Seal)

Vivianne Acheampong

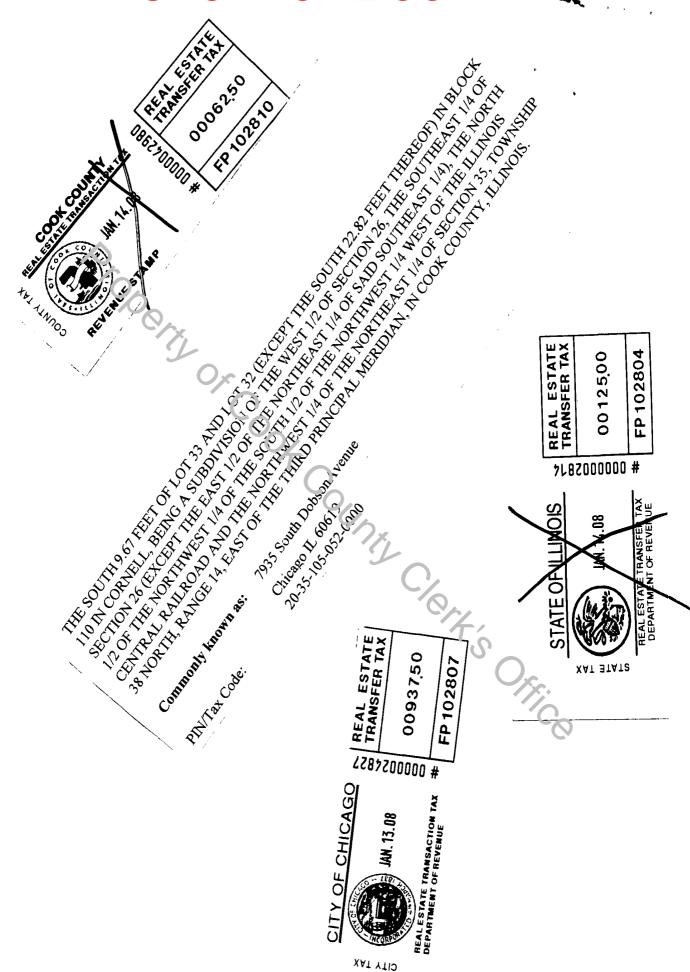
NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

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STATE OF ILLINOIS )	
· / )ss	
COUNTY OF COOL )	
I, the undersigned, a Notary Public in and for THAT  University Coleanspon	
for the uses and purposes therein set forth, inclu	s day in person, and acknowledge that <u>She</u> free and voluntary act,
homestead* Given under try hand and notarial seal, t	his 21 day of Lecender, 2007.
My commission expires on $4-1$ , $200$ .	NOTARY PUBLIC
OFFICIAL SEAL KAREN A SHANER NOTARY PUBLIC - STATE OF ILLIN( IS MY COMMISSION EXPIRES:04/01/10	COUNTY-ILLINOIS TRANSFER STAMP
*If Grantor is also Grantee you may want to stril	0.
NAME and ADDRESS OF PREPARER:  Mitchell A Karbin, Esq.	EXEMPT UNDER PROVISIONS OF PARAGRAPH
KARBIN & ASSOCIATES	SECTION 4 PEAL ESTATE TRANSFER
One Northfield Plaza - Suite 300	ACT
Northfield, IL 60093	DATE:
	Signature of Buyer, Seller, or Representative
** This conveyance must contain the name	and address of the Grantee for tax billing
purposes: (55 ILCS 5/3-5020) and name instrument: (55 ILCS 5/3-5022).	and address of the person preparing the

c:\\WPDOCS\forms\warranty deed illinois statutory.wpd