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Doc#: 1235522105 Fee: \$40.00 Karen A. Yarbrough RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 12/20/2012 03:14 PM Pg: 1 of 2

RELEASE AND SATISFACTION

Whereas, Sonya Y. Rawls, by Forgivable Loan Agreement and Promissory Note dated February 17, 2005, and if the Recorder's Office of Cook County, Illinois, Document No. 0506242108 conveyed to The University of Chicago Medical Center certain premises in Cook County, Illinois, described as:

LEGAL DESCRIPTION:

PARCEL 1:

UNIT 3N IN THE 4434 SOUTH UNIVERSITY CONDOMINIUM AS DELINATED ON A SURVEY OF THE FOLLOWING DESCRIBED LEAL ESTATE:

LOT 17 IN GREENWOOD PARK SUBDIVISION, A SUBDIVISION OF BLOCK 4 IN THE SUBDIVISION OF THE EAST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 2, TOWNSHIP 38 NORTH, RANGE 14 EAST OF THE THERD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

WHICH SURVEY IS ATTACHED AS EXHIBIT "A" TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NUMBER 0426834147, TOGETHER WITH THE UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, ALL IN COOK COUNTY, ILLINOIS.

PARCEL 2:

THE EXCLUSIVE RIGHT TO THE USE OF STORAGE SPACE S-6, A LIMITED COMMON ELEMENT AS DELINEATED ON THE SURVEY ATTACHED TO THE DECLARATION AFORESAID RECORDED AS DOCUMENT NUMBER 0426834147.

PERMANENT INDEX NUMBER (PIN): 20-02-309-018-0000

And commonly known as 4434 S. University, #3N, Chicago, Illinois 60653, (the "Premises"), to secure a note for Seven Thousand Five Hundred Dollars (\$7,500.00) with interest payable as therein provided, (the "Promissory Note"), also dated February 17, 2005; and

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Whereas, Sonya Y. Rawls, has satisfied the repayment obligation set forth in the Promissory Note and the Forgivable Loan entered into between Sonya Y. Rawls and The University of Chicago Medical Center;

Now Therefore, in consideration of the premises and of other valuable consideration, The University of Chicago Medical Center hereby releases and discharges all liens and interests conveyed and assigned by said instruments in and to the aforementioned premises.

The University of Chicago Medical Center

By:
Print Name: William D. Frazier
Title: Associate General Counsel

Date:
Date:
Person 23, 2002

State of ILLINOIS
) ss.

County of COOK

I, Wanda H. Wideman, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that William D. Frazier, Associate General Counsel, 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 he signed, sealed and delivered the said instrument as his free and voluntary act for the used and purposes therein set forth.

Given under my hand and Notarial Seal this 20th day of December 2012

Anda J. Wideman Notary Public

Prepared by and please return to: William D. Frazier Office of Legal Affairs The University of Chicago Medical Center 5841 South Maryland Avenue, MC 1132 Chicago, IL 60637 "OFFICIAL SEAL"
WANDA H. WIDEMAN
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 8/4/2014