UNOFFICIAL COPY

RELEASE OF MORTGAGE OR TRUST DEED BY **CORPORATION (ILLINOIS)**

FOR THE PROTECTION OF THE OWNER, THIS RELEASE SHALL BE



Doc#: 1310222056 Fee: \$42.25

RHSP Fee:\$10.00 Affidavit Fee:

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 04/12/2013 11:20 AM Pg: 1 of 2

FILED WITH THE RECORDER OF	
DEEDS OR THE REGISTRAR OF	
TITLE IN WHOSE OFFICE THE	· ·
MORTGAGE OF DEED OF	
	ABOVE SPACE FOR RECORDER'S USE ONLY
KNOW ALL MEN BY THESE PRESENTS, that DuPage and the State of Illinois for and in continuous and the appeal of the properties of	ThealthCare Associates Credit Union of the County of nsideration of the payment of the indebtedness secured by the Mortgage fall the notes thereby secured, and of the sum of one dollar, the receipt
whereof is hereby acknowledged, aces hereby F	REMISE, RELEASE, CONVEY and QUIT CLAIM unto:
TOMICIA H JAMES A/K/A TOMICIA JAM	MES, AN UNMARRIED PERSON
may have acquired in, through or by a certain mand recorded in the Recorder's Office of COOK No. 0719408183 to the premises of COOK State of Illinois, to we will be supported by the premises of COOK UNIT NUMBER 1S IN 8134-36 SOUTH CALUIT FOLLOWING DESCRIBED REAL ESTATE: L 3/5 OF BLOCK 14 AND THE SOUTH 4/5 OF EFEET THEREOF) INTEREST SUBDIVISION KNORTHWEST 1/4 OF SECTION 34, TOWNSH MERIDIAN, IN COOK COUNTY, ILLINOIS, WI	es therein described as follows, situated in the County
INTEREST IN THE COMMON ELEMENTS IN	
	SIN SIN TO THE PORT OF THE PROPERTY OF THE PRO
together with all the appurtenances and privileg	ges thereunto belonging or appertaining.
Permanent Real Estate Index Number(s): 20-3	1 140/
Address of premises: 8136 S CALUMET #1S	
Witness hands and seal this 21ST da	ay of MARCH , 2013

Jean Morris -

Todd J. Niedermeier - Senlor VP/COO

This instrument was prepared by HealthCare Associates Credit Union, 1151 East Warrenville Road, Naperville, Illinois 60563

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STATE OF ILLINOIS

COUNTY OFDUPAGE				
I_AMY CROCE		a notary public in a	and for said County, in the State	
aforesaid DO HEREBY CERTIFY that		ersonally known to me to	be the	
Lending Manager of HealthCare Ass personally known to me to be the Seni persons whose names are subscribed acknowledged that as such Lending M said instrument as their free and volun purposes therein set forth.	or VP/COO of said to foregoing instrume anager and Senic	c corporation, and person ent, appeared before me to tryP/COO they signe	ally known to me to be the same his day in person and severally d and delivered the	
GIVEN under my hand and official sea	l, this 21ST	day of MARCH	, 2013 .	
My commission expires: 11/10/2016	W^\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1 Dmy C	Mo	
"OFFICIAL SEAL" AMY CROCE Notary Public, State of Illin My Commission Expires Nov. 10 Commission No. 614363	RELEA By Co:	SE DEED	NOTARY PUBLIC	
<u></u>	1151 EAST WARF			
NAPERVILLE, IL 60563				
_		300		
	•	го		
_	TOMICI	A JAMES	S	
<u></u> -	8136 S CA	LUMET #1S	$O_{\mathcal{S}_{c}}$	
-	CHICAG	O IL 60619		
	MA	IL TO		
_	W. W. W.	A JAMES	. /	
_		LUMET #1S O IL 60619	./	
	UNICAG	O 12 00013	- -	