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Doc#: 1407035000 Fee: \$42.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 03/11/2014 09:22 AM Pg: 1 of 3

WARRANTY DEED

The above space is for the recorder's use only

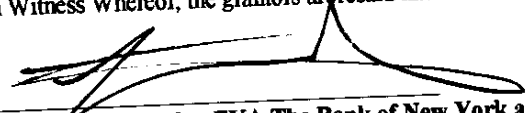
THIS INDENTURE WITNESSETH, THAT the Grantor, **The Bank of New York Mellon FKA The Bank of New York as Trustee for the Certificate Holders CWABS Inc., Asset Backed Certificate, Series 2005-6**, whose address is 101 Barclay Street-8W, New York, N.Y. 10286, for and in consideration of Ten and No/100ths Dollars (\$10.00), and other good and valuable considerations in hand paid, Conveys and warrants unto, **James J. Buckle**, single and never married, of 4343 Clarendon Chicago, Illinois 60613 the following described real estate situated in the County of Cook in the State of Illinois, to wit,

ATTACHED "EXHIBIT A"

together with all the appurtenances and privileges thereunto belonging or appertaining.

Address of Real Estate: 4928 S. St. Lawrence ^{AVE} Chicago, Illinois 60615
Permanent Real Estate Index No: 20-10-218-025-0000

In Witness Whereof, the grantors aforesaid have hereunto set their hands and seals this 23rd day of December, 2013.


The Bank of New York Mellon FKA The Bank of New York as Trustee for the Certificate Holders CWABS Inc., Asset Backed Certificate, Series 2005-6 By Bank Of America N.A., successor by merger to BAC Home Loans Servicing LP as attorney in fact.

Fernando Mayorga, AVP

STATE OF)

COUNTY OF)

for

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that _____ 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/she signed, sealed and delivered the instrument as their free and voluntary act, the uses and purposes therein set forth, including the release and waiver of the right of homestead. Given under my hand and notarial seal this ___ day of ___, 2013.

See Attached Ack

Notary Public

My commission expires: _____

This instrument was prepared by:
David L. Nuckolls Jr.
1205 E. 63rd Street
Chicago, IL 60637

Mail deed and subsequent tax bills to:
James Buckle
4928 S. St. Lawrence
Chicago, Illinois 60615

BOX 334 CTY

SY
SP 3
SN
SCY
NTL



Give WSA 10 19 18 3 5 4


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EXHIBIT A

**THE LAND REFERRED TO IN THIS COMMITMENT IS DESCRIBED AS FOLLOWS:
LOT 2 IN PEARCE'S 2ND ADDITION TO CHICAGO IN THE NORTHEAST 1/4 OF SECTION 10,
TOWNSHIP 38, NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK
COUNTY, ILLINOIS**

Property of Cook County Clerk's Office

REAL ESTATE TRANSFER		01/29/2014
	COOK	\$25.75
	ILLINOIS:	\$51.50
	TOTAL:	\$77.25
20-10-218-025-0000 20140101605466 7MWQ4W		

REAL ESTATE TRANSFER		01/29/2014
	CHICAGO:	\$386.25
	CTA:	\$154.50
	TOTAL:	\$540.75
20-10-218-025-0000 20140101605466 DSB887		

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CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Ventura

On December 23, 2013 before me, Ani Hakobyan (Notary Public)
(Here insert name and title of the officer)

personally appeared Fernando Mayorga

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

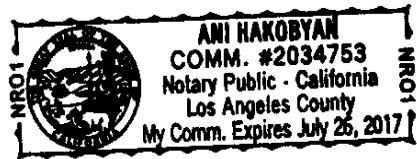
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

(Handwritten Signature)

Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section, or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/~~they~~, is/~~are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

DESCRIPTION OF THE ATTACHED DOCUMENT	
Warranty Deed	
(Title or description of attached document)	
(Title or description of attached document continued)	
Number of Pages <u>2</u>	Document Date <u>12/23/2013</u>
(Additional information)	

CAPACITY CLAIMED BY THE SIGNER	
<input type="checkbox"/>	Individual (s)
<input checked="" type="checkbox"/>	Corporate Officer AVP
(Title)	
<input type="checkbox"/>	Partner(s)
<input type="checkbox"/>	Attorney-in-Fact
<input type="checkbox"/>	Trustee(s)
<input type="checkbox"/>	Other _____