

# UNOFFICIAL COPY



1420333028

Doc#: 1420333028 Fee: \$42.00  
RHSP Fee: \$9.00 RPRF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 07/22/2014 10:44 AM Pg: 1 of 3

## QUIT CLAIM DEED

1572422617

MAIL TO:



Deed +

NAME & ADDRESS OF TAXPAYER

MICHAEL E. Gierman  
LAUREN A. Gierman  
7660 W. Ponderosa Dr.

Palms Heights, IL 60463

GRANTOR, BANK OF AMERICA, N.A., by assignment, County of Ventura, in the State of California and in consideration of Ten Dollars (\$10.00) and other good and valuable consideration in hand paid, REMISES, QUIT CLAIMS to the GRANTEES, MICHAEL E. GIERMAN AND LAUREN A. GIERMAN, in the County of Cook, in the State of Illinois, the following described real estate:

LOT 4 (EXCEPT THE EAST 1/2 THEREOF) AND ALL OF LOT 5 IN BLOCK 7 IN HANSON PARK, A SUBDIVISION OF THE SOUTHWEST 1/4 OF THE NORTHEAST 1/4 (EXCEPT RAILROAD) IN SECTION 25, TOWNSHIP 38 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

Permanent Index No: 24-25-220-033-0000

Known as: 2711 122ND PLACE, BLUE ISLAND, IL 60406

SUBJECT TO: (1) General real estate taxes not due and payable at time of closing;  
(2) Covenants, conditions and restrictions of record.

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

S Y  
P 3  
S N  
SC Y  
INT ✓

DATED this 4th day of February, 2014.

*Chris Tirona*

(Grantor)

BANK OF AMERICA, N.A., by assignment  
Chris Tirona, BANA, AVP, REO Sales

### REAL ESTATE TRANSFER TAX

03-Jul-2014



COUNTY: 14.50  
ILLINOIS: 29.00  
TOTAL: 43.50

1

Attorneys' Title Guaranty Fund, Inc.  
1 S. Wacker Dr., STE 2400  
Chicago, IL 60606-4650  
Attn: Search Department

# UNOFFICIAL COPY

STATE OF \_\_\_\_\_

SS

COUNTY OF \_\_\_\_\_

I, the undersigned, a Notary Public in and for the County and State aforesaid, DO HEREBY CERTIFY that \_\_\_\_\_ personally known to me to be the same person(s) whose name(s) \_\_\_\_\_ subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that \_\_\_\_\_ 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 notary seal, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

**\*See attached Certificate of Acknowledgment**

COUNTY - ILLINOIS TRANSFER STAMPS

Exempt Under Provision of  
Paragraph \_\_\_\_\_  
Real Estate Transfer Act  
35 ILCS 200/31-45

Prepared by:  
Codilis & Associates, P.C.  
Matthew Moses, ARDC #6278082  
15W030 North Frontage Road  
Suite 100  
Burr Ridge, IL 60527

Date: \_\_\_\_\_

File: 14-13-32137

Signature: \_\_\_\_\_

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## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Ventura

On February 4, 2014 before me, Lidia Alfaro, Notary Public  
(Here insert name and title of the officer)

personally appeared Chris Tirona

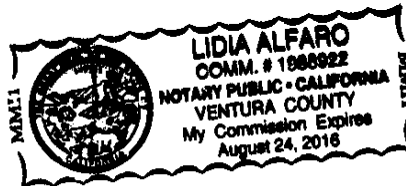
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s),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

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 long as it is 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 signers 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

##### QUIT CLAIM DEED

(Title or description of attached document)

2711 122nd Place Blue Island IL 60406

(Title or description of attached document continued)

Number of Pages 2 Document Date 2/4/2014

(Additional information)

#### CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
- Corporate Officer  
AVP  
(Title)
- Partner(s)
- Attorney-in-Fact
- Trustee(s)
- Other \_\_\_\_\_