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Warranty Deed TENANCY BY THE ENTIRETY Statutory (ILLINOIS) (Individual to Individual)

CAUTION: Consult a lawyer before using or acting under this form. Neither the publisher nor the seller of this form mekes any warranty with respect thereto, including any warranty of merchantability or fitness for a particular purpose.

THE GRANTOR (NAME AND ADDRESS)

DANIEL SABBIA and ADRIENNE SABBIA, his wife

Doc#: 1528801011 Fee: \$40.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00 Karen A.Yarbrough

SEE REVERSE SIDE >

Cook County Recorder of Deeds
Date: 10/15/2015 09:42 AM Pg: 1 of 2

(The Above Space For Recorder's Use Only)

of the	(Lt)		of	Chicago		County
of	<u>Coo'</u> (7 43 6 665		, State of _	Illinois	County
for and in co	nsideration of <u>1931</u>	(\$10,00)	DOLLAR	S,		
in hand paid,	CONVEY ard v	VARRANT to	TU LUU and	I HIEU TRUONG		
**		Ox	3300 S. Nor			
			Chicago, Il			
1 . 1 1	ert ooten ook ook oo	(NAMES AN	D ADDRESS OF GRAN	ITEES)		
as husband at	nd wife, not as Joint 7	chants with rights	of survivorship	o, nor as Tenants in	Common, but as 7	ENANTS
in the State of	TIRETY, the following	reverse side for the	Estate situated i	in the County of	<u>Jook</u>	
hy virtue of th	f Illinois, to wit: (See in the Homestead Exemption	on I awe of the State	gai description.)	nereby releasing and	waiving all rights	under and
and wife, not	as Joint Tenants nor a	us Tenants in Com	marka as TEN	MA SUT DV AND IO HU	YLD said premises a	as husband
TO: General	taxes for 2015	_ and subsequent	years and	WILL OF THE EN	TIKELI lotever.	SOBJECT
			90			
		17 22 122 114	0000	,		
Permanent In	dex Number (PIN):	17-33-123-114	-0000			· · · · · · · · · · · · · · · · · · ·
Address(es) o	f Real Estate: <u>3300</u>) S. Normal A	<mark>venue - Chi</mark> o	ago, 11 60616		
PLEASE PRINT OR TYPE NAME(S)	Damil &	elli	DATED this _ (SEAL)	Odleme ADRIFNNE SABBIA	allui	_005 _(seal)
BELOW SIGNATURE(S)		· · · · · · · · · · · · · · · · · · ·	(SEAL)		1750	_(SEAL)_
						_(0L/15)
State of Illino	is, County of	Cook	22	I, the undersigned,	a Notary Dublic :	
	,	said County, in	the State afore	said, DO HEREBY	CERTIFY that	n and 10
000000				ENNE SABBIA, hi		S
OFFIC	CIAL SEAL			•		Ç
S PHILIP I	K CODDAL Z	personally kno	wn to me to t	e the same person	s whose name_	s are S
אוואווא זאטיייי	CTATE	and acknowled	ie toregoing ins	trument, appeared be	fore me this day i	n person
MT COMMISSIO	N EXPIRES:04/18/16	instrument as	their free	hey signed, sea and voluntary act,	led and delivered	the said
IMPRES	S SEAL HERE	therein set forth	i, including the	release and waiver	of the sight of how	purposes
Civan undar n	ny hand and official s		NO			lestead.
	•	,		day of Octo	0219)0	1015
Commission e	xpires April 18,	2010		Well Nothing on	rocci	
This instrumer	nt was prepared by	HILIP K. GORI	ON, Atty at	Law - 809 W.	St., Chgo	, Il
*Il Grantor is also (Grentee you may wish to sirik	e Release and Waiver of		ino noonegaj	٠.	60609
				•	. 1	

1528801011 Page: 2 of 2

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Legal Description

f premises commonly known as	3300 S.	Normal Avenue	- Chicago,	Illinois	60616
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LOTS 1 AND 2 (EXCEPT THE SOUTH 10 FEET THEREOF) IN MARVIN'S GARDENS; BEING A RESUBDIVISION OF LOTS 1 TO 5, INCLUSIVE, 12 TO 14, INCLUSIVE, 16 AND 17 IN THE ASSESSOR'S DIVISION OF BLOCK 11 IN THE CANAL TRUSTEES' SUBDIVISION OF SECTION 33, TOWNSHIP 39 NORTH, RANGE 14, TOGETHER WITH LOTS 1 TO 5, INCLUSIVE, IN P.D. ARMOUR'S SUBDIVISION OF PART OF BLOCK 11 IN THE CANAL TRUSTEE'S SUBDIVISION OF SECTION 33, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

ADDRESS: 7300 S. NORMAL AVENUE - CHICAGO, IL 60616

PIN: 17-33-123-114-0000

 REAL ESTATE TRANS : ER TAX
 05-Oct-2015

 CHICAGO:
 8,850.00

 CTA:
 3,540.00

 TOTAL:
 12,390.00

 17-33-123-114-0000
 20150904-577741
 1-180-155-776

REAL ESTATE TRANSFER TAX

05-0 ct-2015

3

COUNTY: 590.00 ILLINOIS: 1,150.00 TOTAL: 1,770.00

17-33-123-114-0000 | 20150901627741 | 1-930-526-592

MAIL TO:

| SEND SUBSEQUENT TAX BILLS TO:
| Tuly & Hieu Tryong (Name) | 3300 5 Normal (Address) | Chicago IL 6061 & City, State and Zip) | Chicago IL 6061 & City, State and Zip)

OR

RECORDER'S OFFICE BOX NO. _____

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