UNOFFICIAL COPY

RELEASE OF MORTGAGE OR TRUST DEED BY CORPORATION (ILLINOIS)

FOR THE PROTECTION OF THE OWNER, THIS RELEASE SHALL BE FILED WITH THE RECORDER OF DEEDS OR THE REGISTRAR OF TITLE IN WHOSE OFFICE THE MORTGAGE OF DEED OF



Doc#: 1600613044 Fee: \$42.2 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 01/06/2016 02:52 PM Pg: 1 of 2

	ABOVE SPACE FOR RECORDER'S USE ONLY		
KNOW ALL MEN BY THESE PRESENTS, that	HealthCare Associates Credit Union of the County of		
_	sideration of the payment of the indebtedness secured by the Mortgage all the notes thereby secured, and of the sum of one dollar, the receipt		
	REMISE, RELEASE, CONVEY and QUIT CLAIM unto:		
FROILAN G YABES AND CECILIA R YA REVOCABLE LIVING TRUST, WITH RIGH	BES, CO-TRUSTEES OF THE YABES FAMILY HTS OF SURVIVORSHIP		
may have acquired in, through or by a certain m and recorded in the Recorder's Office of <u>COOK</u>	s therein described as follows, situated in the County		
PARCEL 1: LOT 1 (EXCEPT THE SOUTH 44 FEET THEREOF) IN BLOCK 3 IN ARTHUR MICHEL AND COMPANY'S 3RD ADDITION TO HOWARD L. SUBDIMISION IN THE SOUTHEAST 1/4 OF SECTION 27, TOWNSHIP 41 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN.			
PARCEL 2: THE SOUTH 34.4 FEET OF LOT 24 IN BLOCK 5 IN ARTHUR MICHEL AND COMPANY'S HOWARD L. SUBDIVISION IN THE SOUTHEAST 1/4 OF SECTION 27, TOWNSHIP 41 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COUR COUNTY, ILLINOIS.			
together with all the appurtenances and privileg Permanent Real Estate Index Number(s): 10-2	es thereunto belonging or appertaining.		
Address of premises: 7506 N Kildare Skokie,	IL 60076-3824		
Witness hands and seal this 5TH da	y of OCTOBER , 201 5		
 	July		
Jean Morris - Lending Manager			

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

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STATE OF ILLINOIS		·	
COUNTY OF	DUPAGE		
I TRACY R BREYER		, a notary public in ar	nd for said County, in the State
aforesaid DO HEREBY C	ERTIFY that Jean Morris po	ersonally known to me to b	e the
Lending Manager of He	ealthCare Associates Credit Union,	an Illinois corporation, and	Todd J. Niedermeier
personally known to me to			ally known to me to be the same
	e subscribed to foregoing instrume	• •	
acknowledged that as suc	. — vas -scapenem unannum pur p	0. 50.0 1.50.1	and delivered the
	ree and voluntary act, and as the fr	ee and voluntary act of sa	id corporation, for the uses and
purposes thereir, set forth	1.		
6			
GIVEN under my hand ar	nu official seal, this 5TH	day of <u>OCTOBER</u>	, 2015 <u>.</u>
My commission expires:	NC√FMBER 1, 2017		
,			R
	Ox	July	Jey!
		TRACY R BREYER	NOTARY PUBLIC

	0/		"OFFICIAL SEAL" TRACY R. BREYER
		SE DEED	S Notary Public. State of Illinois
	Бу Со	poration	My Commission Expires Nov. 01, 2017
	HEALTHCARE ASSO	CIA TES CREDIT UNION	Commission No. 793804
	1151 EAST WARF	RENVILLE ROAD	
	NAPERVILLE	, IL 6053?	
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		4	
		N G YABES	0
		A R YABES	$ \bigcirc_{x_{-}}$
		DARE AVE	- //5:
	SKOKII	E, IL 60076	Office
	MA	AIL TO	
	FROLIA	N G YABES	
	CECILIA	A R YABES	-
	7506 KII	DARE AVE	-
	SKOKI	E, IL 60076	_