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GIT

Chicago Title Insurance Company

Warranty DEED
ILLINOIS STATUTORY

4110478226 1/1

Doc#: 1927555050 Fee: \$98.00
Edward M. Moody
Cook County Recorder of Deeds
Date: 10/02/2019 09:56 AM Pg: 1 of 3

Dec ID 20190901696597
ST/CO Stamp 1-476-888-160 ST Tax \$81.50 CO Tax \$40.75
City Stamp 0-986-089-056 City Tax: \$855.75

THE GRANTOR(S), Patrick Collins and Patricia Collins as husband and wife, of the City of Vista, County of San Diego, State of California for and in consideration of TEN & 00/100 DOLLARS, and other good and valuable consideration in hand paid, CONVEY(S) and Warrant(s) to 1st Central LLC (GRANTEE'S ADDRESS) 5413 N. Central Avenue, Chicago, IL 60630 of the County of Cook, all interest in the following described Real Estate situated in the Cook in the State of Illinois, to wit:

LOT 8 IN THE SUBDIVISION OF LOTS 49 TO 72 BOTH INCLUSIVE IN CUMMINGS AND FARGO'S NORTH 52ND AVENUE ADDITION, BEING A SUBDIVISION OF PART OF THE WEST 3/8 AND 8 FEET EAST OF AND ADJOINING SAID WEST 3/8 OF THE SOUTH 1/2 OF THE NORTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 4, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

SUBJECT TO:

Covenants, conditions and restrictions of record, General taxes for the year 2019 and subsequent years including taxes which may accrue by reason of new or additional improvements during the years 2019

Permanent Real Estate Index Number(s): 16-04-408-008-0000
Address(es) of Real Estate: 1037 N. Leamington Avenue, Chicago, IL 60651

Dated this 22nd day of Sept., 2019

Patrick Albert Collins

Patrick Albert Collins

Patricia Ann Collins

Patricia Ann Collins

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STATE OF CALIFORNIA, COUNTY OF SAN DIEGO ss.



I, the undersigned, a Notary Public in and for said County, in the State aforesaid, CERTIFY THAT Patrick Albert Collins and Patricia Ann Collins, personally known to me to be the same person(s) whose name(s) are subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the said instrument as their 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 official seal, this _____ day of _____,

See attached (Notary Public)

Prepared By: John Janczur
19 S. La Salle Street, #1201
Chicago, IL 60603

Mail To:
1st Central LLC
5413 N. Central Ave.
Chicago, IL 60630
Name & Address of Taxpayer:
1st Central LLC
5413 N. Central Ave.
Chicago, IL 60630

REAL ESTATE TRANSFER TAX		30-Sep-2019	
	COUNTY:		40.75
	ILLINOIS:		81.50
	TOTAL:		122.25
16-04-408-008-0000 20190901696597 1-476-888-160			

REAL ESTATE TRANSFER TAX		30-Sep-2019	
	CHICAGO:		611.25
	CTA:		244.50
	TOTAL:		855.75 *
16-04-408-008-0000 20190901696597 0-986-089-056			
* Total does not include any applicable penalty or interest due.			

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CALIFORNIA ACKNOWLEDGMENT

CIVIL CODE § 1189

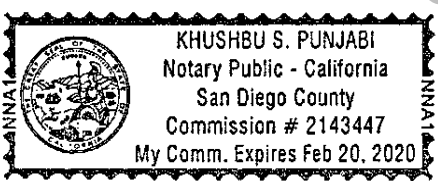
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }
County of San Diego }

On 09/23/2019 before me, Khushbu S. Punjabi, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared Patrick Akent Collins, Patricia Ann Collins
Name(s) of Signer(s)

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 [Handwritten Signature]
Signature of Notary Public

Place Notary Seal and/or Stamp Above

OPTIONAL

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: unimovnty recd

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____	Signer's Name: _____
<input type="checkbox"/> Corporate Officer – Title(s): _____	<input type="checkbox"/> Corporate Officer – Title(s): _____
<input type="checkbox"/> Partner – <input type="checkbox"/> Limited <input type="checkbox"/> General	<input type="checkbox"/> Partner – <input type="checkbox"/> Limited <input type="checkbox"/> General
<input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact	<input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact
<input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator	<input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
Signer is Representing: _____	Signer is Representing: _____