## **UNOFFICIAL COPY**

QUIT CLAIM DEED
Statutory (ILLINOIS)
INDIVIDUAL TO INDIVIDUAL

Doc#. 2031928066 Fee: \$98.00

Edward M. Moody

Cook County Recorder of Deeds
Date: 11/16/2020 04:07 PM Pg: 1 of 3

Dec ID 20201001635897 ST/CO Stamp 0-577-496-032 City Stamp 1-114-366-944

Above Space for Recorder's use only

THE GRANTOR (S), ACNIESZKA KARWACKA, a divorced woman not since remarried, of 4210 N. Natchez Ave., Unit 403, Chicago, Illinois 60634 of the County of Cook and the State of Illinois, for and in consideration of the sum of TEN DOLLARS (\$10.00) and other good and valuable consideration in hand paid, CONVEY(S) and QUIT CLAIM(S) to, KEVIN WOLSKI, a single man, the following described Real Estate situated in the County of COOK, in the State of Illinois, to wit:

UNIT 4-403 TOGETHER WITH ITS UNITIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN THE GLENLAKI. CONDOMINIUM NO. 2 AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NO. 99465987, AS AMENDED FROM TIME TO TIME, IN PART OF THE SOUTH FRACTIONAL ½ OF SECTION 18, TOWNSHIP 40 NORTH, RANGE 13, FAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Permanent Index Number:

13-18-409-074-1029

Property Address:

4210 N. Natchez Avenue, Unit 403, Chicago, Illinois 60634

SUBJECT TO: (1) Covenants, conditions, and restrictions of record. (2) General real estate taxes for the tax year 2020 and subsequent years.

DATED: October 22, 2020

GNIESZKA KARWACKA

**QUIT-CLAIM DEED** 

## **UNOFFICIAL COPY**

4210 N. NATCHEZ AVE., UNIT 403 - CHICAGO

| State of ILLINOIS                                                                                                                                     | )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      |                                       |                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------|
| County of COOK                                                                                                                                        | )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      |                                       |                                                                                     |
| I, the undersigned, a Notary<br>CERTIFY that AGNIESZK<br>whose name is subscribed to<br>severally acknowledged that<br>voluntary act, for the uses an | A KARWACKA, pe<br>the foregoing instrume<br>the signed, sealed an                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | rsonally known to a<br>ent, appeared before<br>and delivered said in | me to be the san<br>me this day in pe | ne person<br>rson, and                                                              |
| Given under my hand and off                                                                                                                           | ficial seal, this 2200                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | day of Octob                                                         | er, 20 20                             | - 250 >                                                                             |
| Commission expires: 3-11  This Instrument was prepa                                                                                                   | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | NOTARY                                                               |                                       | OFFICIAL SEAL SALESZIVA B BIELACZY ARY PUBLIC - STATE OF ILL COMMISSION EXPIRES:022 |
| Suite 103., Park Ridge, IL 6                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 45.                                                                  | .,,                                   | NOSS<br>NOSS                                                                        |
| MAIL RECORDED DEED                                                                                                                                    | <u>TO:</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | SEND SUBSEQU                                                         | ENT TAX BILI                          | <u>. TO:</u>                                                                        |
| Mr. Kevin Wolski                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Mr. Kevir Welski                                                     |                                       |                                                                                     |
| 4210 N. Natchez Ave., Unit                                                                                                                            | 403                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 4210 N. Naichez A                                                    | *                                     |                                                                                     |
| Chicago, IL 60634                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Chicago, IL 60634                                                    |                                       |                                                                                     |
| EXEMPT UNDER REAL I<br>TAX LAW 35ILCS 200/31-                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | R                                                                    |                                       |                                                                                     |
| DATE: //                                                                                                                                              | 7-22-2020                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                      |                                       |                                                                                     |
| SIGNATURE: Almille                                                                                                                                    | La Hantala<br>Karwacka, Grantor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | -                                                                    |                                       | 9                                                                                   |
|                                                                                                                                                       | The second secon |                                                                      |                                       |                                                                                     |

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## Statement by Grantor and Grantee

The Grantors or her/his agent, affirms that, to the best of their knowledge, the name of the Grantees shown on the Deed or Assignment of Beneficial Interest in a Land Trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire and hold title to real estate under the laws of the State of Illinois.

10-22-2020 Alfred S. Dyng, Attorney at Law Subscribed and sworn to before me by the said Grantors this 22 day of 1000 . 2020. OFFICIAL SEAL AGNIESZKA B BIELACZYC Notary Public NOT VRY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:03/11/24

The Grantees or her/his agent, affir as and verifies that the names of the Grantees shown on the Deed or Assignment of Beneficial Interest in a Land Trust is either a natural person, an Illinois corporation or foreign corporation authorized to to business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire and hold title to real estate under the laws of the State of Illinois. Clarks

Dated: Alfred S. Dynia, Attorney at Law

Notary

Abscribed and sworn to before me by the said Grantors this 22 day of 1000000

OFFICIAL SEAL AGNIESZKA B BIELACZYC NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:03/11/24

Note: Any person who knowingly submits a false statement concerning the identity of a Grantee shall be guilty of a Class C Misdemeanor for the first offense and of a Class A Misdemeanor for subsequent offenses.

Attach to Deed or Assignment of Beneficial Interest to be recorded in Cook County, Illinois, if exempt under provisions of Section 4 of the Illinois Real Estate Transfer Act.