UNOFFICIAL COPY

CLO E COLE & CO CHICAGO LEGAL BLANKS (NEW FEEGUE COUNTY, ILLINOIS WARRANTY DEED—Joint Tensiled FOR RECORD STATUTORY (ILLINOIS)	21. 531 305 RECORDER OF DEEDS
(INDIVIDUAL TO INDIVIDUAL)	21531305
Approved By Chicago Title and Trust Co. 11 12 20 Th	(The Above Space For Recorder's Use Only)
THE GRANTORS, JOSEPH A. SCHEIBEN his wife	(The Above Space For Recorder's Use Only) REIF and LENORE H. SCHEIBENREIF,
of the City of Chicago County for and in consideration of Ten and No/100 (and other good and valuable consideration)	\$10.00) DOLLARS,
not in Tenancy in Common, but in JOINT TENANCY the County of Cook in the State	of Illinois, to wit:
Lot Three (3) in Block Six (6) in Sirifth Addition to Mont Clare bein East Half of the West Half of the	g a Subdivision of the South West Fractional
Quarter of Fractional Section Tw South of Indian Boundary Line in North, Range Twelve (12), East of Myridian, in Cook County, Illinoi	Township Forty (40) of the Third Principal
Ox	NAMPS .
C	NEVENUE STAMPS HER
0	OR RE
the State of Illinois. TO HAVE AND TO I OLD said a tenancy forever. SUBJECT TO: General Tax's for special assessments of record and restrictions of record. DATED this /ST day	the year 1970 and thereafter,
(So	(al) X Oo ush (a. Scheidenricheal)
PLEASE PRINT OR	Joseph A Scheibenreif
TYPE NAME(S)	Charles N. J. J. W. J. Box BC
signature(s)	Lenore H. Sche penreif (Seal)
State of Illinois, County of COOK s	s., I, the undersione , a Notary Public in
JOSEPH A. SCHEIBEN	REIF and LENORE H. J. HEIBENREIF,
Sperson, and acknowledged the	e the same persons whose names are instrument appeared before mo his day in that the Vigigned, sealed and delivered the said and voluntary act, for the uses and jurpos is
Given under the reference of and official seal, this	474 day of JUNE 19 11
Commission expires. August 15 1974	CHESTER P. MAJEWSKI
	ADDRESS OF PROPERTY: 3346 N. Opal Avenue Chicago, Illinois
NAME .	THE ABOVE ADDRESS IS FOR STATISTICAL PURPOSES ONLY AND IS NOT A PART OF
MAIL TO: ADDRESS	
CITY AND STATE	SEND SUBSEQUENT TAX BILLS TO:
OR RECORDER'S OFFICE BOX NO. 419	(ADDRESS)

*END OF RECORDED DOCUMENT