## UNOFFICIAL COPY

GEORGE E. COL LEGAL FORM		CODE COUNTY, ILLINOIS	0:		Personal Police (FO)	T. Chen DEEDS
	Tenancy Illinois Statutory	Dec 3'71 3 03 F	<sub>PH</sub> 21 732	2 340	2173	2340
	ndividual to individual)	(T)	ne Above Space For	Recorder's Use Only)		
		RT W. LEE, a wic				
for and in	City of Chica consideration of ner good and valuab	Ten and No/100-	Cook St			
CONVE	Y s and WARRANT UZANNE MADSEN,	s to THEODORI	E J. MADSE1 ce Street,	N and PENNY	nand paid,	
not in Te	City of Chica	JOINT TENANCY, the	following describ			
Lo	of <u>Cook</u> t 44 in J. W. Cochr Canal Trustees Su	rans Subdivision of	the North pa			
14	East of the Third	Principal Meridian	n (excepting t	hat part from t		14
Subjec		axes for 1971 and s				
	to restriction.	tions, conditions a	na covenants ;	or record,		4. 0. 1
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d		<u>_</u>		FO	$\supset$	ALES
03-7		0/		JU	2	Næ i
9		00/	١.	The state of the s		
hereby i	eleasing and waiving all ris	ghts under and by vi, tue o	of the Homestead I	Exemption Laws of t	he State of	2006 8 0
Illinois.	TO HAVE AND TO HO	OLD said premises not in	tena icy in commo	on, but in joint tenand	cy forever,	CO. NO. 016
7	DATED this	26th da	r Nove	mber	1971	
-0				/	ì	
PLEASE PRINT OF TYPE NAME		(Scar		W. Lee	(Sear)	
BELOW	*	(Sea	D		(Seal)	
State of	Illinois, County ofC	Cook ss.	1. the	undersigned, a No	ev Public in	
and for	said County, in the State af	foresaid, DO HEREBY C	ERTIFY that_	Robert W. Lee	a widower	;
100		alfy known to me to be the	trument, appeared	whose name 18	y in persor	_
0	HEEE TO as	knowledged that h _e his free and vo including the release and	oluntary act, for th	he uses and purposes		
Given	Ader my Nande and official		_	ovember	19_71	
	ssion expires Filmin	m 2 1973 _	Jelen	C Call	NOTARY PUBLIC	<u> </u>
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			ADDRESS OF I	est Race Stree	t	M. T
	(	Name)	}			3 7 1
MAIL TO	). }	Name)	Chicag	o, Illinois Address is for statist IS NOT A PART OF THIS DE		732 3
MAIL TO	): {	Address)	Chicag THE ABOVE ONLY AND SEND SUBSE The odd	o. Illinois	TICAL PURPOSES ED.	21 732 340 DOCUMENT NUMBER

\*END OF RECORDED DOCUMENT