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16221028

WARRANTY DEED

THIS INDENTURE made on the date

indicated herein below, By and Between:

CHESTER E. PETERSON, JR., never

married man of 1608 MODEON APTAU

SANTUCIGRE (N) (Grantor), and

KCM PROPERTY MANAGEMENT, LLC,

an Indiana ! mited liability corporation of

13073 Watericaf Dr. St John, IN (Grantee);

Doc#. 2116628251 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 06/15/2021 11:35 AM Pg: 1 of 3

Dec ID 20210501640906

ST/CO Stamp 0-809-474-320 ST Tax \$65.00 CO Tax \$32.50

WITNESSETH: State said Grantor, for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration, the receipt whereof is hereby acknowledged, CONVEYS and WARRANTS to Grantee, all interest in the following described Real Estate, to wit:

Legal Description:

Lot Eighteen (18) in Block Three (3) ir. Michigan Avenue No. 1 being a Subdivision in the Northeast Quarter (1/4) of the Northwest Quarter (1/4) of Section 11. Township 36 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

P.J.N. 29-11-115-024-0000

Commonly known as: 14634 University Ave, Dolton, JL 60419

hereby releasing and waiving all rights under and by virtes of the Homestead Exemption Laws of the State of Illinois. SUBJECT TO: (a) general real estate taxes not due and payable of the time of closing; (b) building lines and building laws and ordinances, use or occupancy restrictions, conditions and coverants of record; (c) zoning laws and ordinances which conform to the present usage of the premises; (d) public and utility resements which serve the premises; and (e) public roads and highways, if any.

toaus and digaway.	•	This is Non-Homestead Prope	rty.	
In Witness Whereof	The said Granter has	hereunto set his/her hand and	I seal, tals 20th da	rot May 2021.
	TSI	Chester E. Peterson, Jr., Grance		
		ACKNOWLEDGMENT	VILLAGE OF DOLTON	NA 04007
STATE OF)	ACRITOWEDGMENT	ADDRESS 4634 W	10218044331
) SS:		ISSUE	EXPIRED 11/10
COUNTY OF)	,	TYPE LIGHT TYPE	Still Tellow
Before me,	the undersigned, a Not	ary Public in and for said Cou	inty and State, this	day of
, 20 _	21 , personally appe	ared <u>CHESTER E. PETERS</u>	ON, JR. Grantor(s) an	d acknowledged the
execution of the for	egoing instrument was :	a free and voluntary act.		
Witness my	y hand and official seal.	SEE Notary Public	ATTACHED	
MAIL TO & SEND	TAX BILLS TO:	PO Box 401 St. Janu. W 463	in uc.	_
This instrument pre	pared by: Law Office of		•	 . 601

2116628251 Page: 2 of 3

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Proberty of Cook County Clerk's Office

EAL ESTATE TRANSFER TAX		26-May-2021	
		COUNTY;	32.50
	(S 0.	ILLINOIS:	65.00
		TOTAL:	97.50

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 SANTA CLARA	L) NOTARY
On 05/90/2021 before me,	ANDRES LOZANO PUBCIC
personally appeared CHESTER	E. PETERSON JR
	sfactory evidence to be the person(s) whose
	n instrument and acknowledged to me that
	her/their authorized capacity(ies), and that by
which the person(s) acted, executed the	ment the person(s); or the entity upon behalf of
which the person(s) acted, executive the	ie ustalient,
•	Y under the laws of the State of California that
the foregoing paragraph is true and co	
	ANDRES LOZANO
WITNESS my hand and official seal.	Commission No. 2211195 Z
I' = O + A	SANTA CLARA COUNTY My Comm Expres AUGUST 24, 2021
AWOUD	wy obniu 2.4,103 70000 27, 2021
Notan Public Signature (Notary Public Seal)
•	INSTRUCTIONS FOR COMPLETING THIS FORM
ADDITIONAL OPTIONAL INFORMA	ION This form complies with current California stations regarding notary wording and
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed should be completed and attached to the document Acknowledgments from other states may be completed for document for great to that state so long
	as the wording does not require the California notary is violate California notary law
Title or description of attached document)	State and County information must be the State and County where the document
	signer(s) personally appeared before the notary public for a conceledgment Date of notarization must be the date that the signer(s) personally appeared which
(Title or description of attached document continued)	must also be the same date the acknowledgment is completed The notary public must print his or her name as it appears within his or her
Number of Pages Document Date	commission followed by a comma and then your title (notary public)
	 Print the name(s) of document signer(s) who personally appear at the time of notarization
CAPACITY CLAIMED BY THE SIGNER	Indicate the correct singular or plural forms by crossing off incorrect forms (i.e.)
Individual (a)	he she they- is are 1 or curcing the correct forms. Failure to correctly indicate this information may lead to rejection of document recording
☐ Corporate Officer	The notary seal impression must be clear and photographically reproducible lingression must not cover text or lines. If seal impression smudges, re-seal if a
(Title)	sufficient area permits, otherwise complete a different acknowledgment form
☐ Partner(s)	 Signature of the notary public must match the signature on file with the office of the county clerk
☐ Attorney-in-Fact ☐ Trustee(s)	 Additional information is not required but could help to ensure this acknowledgment is not inisused or attached to a different document
Other	 Indicate title or type of attached document, number of pages and date Indicate the capacity claimed by the signer If the claimed capacity is a
	corporate officer, indicate the title (i.e. CEO, CFO, Secretary)
	 Securely attach this document to the signed document with a staple