UNOFFICIAL COPY

GEORGE E. COLE* No. 810 July, 1967	Chat you there	6)	
(48 WARRANTY DEED	21 294 789 1970 OCT 2	0 PM 1 20	
Joint Tenancy Illinois Statutory	OCT-20-70 157615 • 212947	789 A — Rec 5.10	l
92-10-20 (Individual to Individual)	(The Above Space For Recorder's U	(se Only)	
THE GRANTOR S, PHILDIP M.	LANG and ESTHER LANG, his wife	e	
of the City of Skokie	County of Cook State of II		
for and in consideration of Ten (\$10. and all other good and val CONVEY and WARRANT to	00)	DOLLARS. in hand paid. IN, his	
wife of the City of Chicago			
not in Tenancy in Common, but in JOIN County of Cook	T TENANCY, the following described Real Est in the State of Illinois, to wit:	tate situated in the	
	_		
	of lot 6 and all of lot 7 in		
1/4 of Section 6, To	tion to Chicago in the North W wnship 39 North, Range 14, Eas Meridian, according to plat re	st of	
March 18, 1886 as do			
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	1500	VENUENCE	
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	e. and ov virtue of the Homestead Exemption La I premise suct in tenancy in common, but in joint	aws of the State	1
		 	
DATED this 8t	h day 1 October	/19 70	
	(Seal) Alle W	Lau (Scal)	
PLEASE PRINT OR	Pn'ili y M. Lang	O - (// .)	
TYPE NAME(S) BELOW	(Scal) X & Strue Land	(Seal)	
SIGNATURE(S)	Esther Lang		
State of Illings County of Cook and for Said County's in the State aforesaid. I	ss. 1, the undersig. ed. a DO HEREBY CERTIFY that Phillip of	No ary Public in	
S C O au personally know	er Lang, his wife		
and acknowledg	ne foregoing instrument, appeared before me the ed that h @Y signed, sealed and delivered the free and voluntary act, for the uses and pur	ne said incere ment	
	the release and waiver of the right of homestead		
Given under my hand and official seal, this_	STON day of October	19/2	
Approximation expires 7 - 2 u	19.12 Ming Sper	NOTARY PUBLIC	
	Eraute.1	000	
PLEAS HAYBIN	ADDRESS OF PROPERTY: 1251 North Ho	DOCUMENT NUMBER Inois Inois Haristical Purposes io	
MAIL TO: 1257 No. 4041	Chicago, Illi THE ABOVE ADDRESS IS OR ST ONLY AND IS NOT A PART OF TH	nois	
Chap Til	SEND SUBSEQUENT TAX BILLS TO	O: SEED.	
OR RECORDER'S OFFICE BOX NO.	(Name)		
	(Address)		
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SEND OF RECORDED DOCUMENT