## **UNOFFICIAL COPY**

LEGAL FORMS QUIT CLA	NO. 229 July, 1967	NOW IF AH 11 37	22 531	COCK COUNTY	1 54 65 110 66 6
Joint Tenancy II		-1-73 708286	• 22531818	018 □ A — Rec	<b>5.1</b> 0
(Individual to			or Recorder's Use Only		7.20
THE GRANTOR	Herbert M. Davis, o	divorced and no	t since		
of the city	of Chicago County of	Cook	state ofIllino		ļ
and other go	of Chicago County of One of TEN (\$10.00)	iderations W. Donahue and	i	DOLLARS. n hand paid.	Ŗ
of the City		rCook	State ofIlling	is	
not in Tenancy in Lituated in the Co	Common. but in JOINT TENAN unty of <u>Cook</u>	ICY, all interest in the same in the State of Illi		Real Estate	
Partit	in Subdivision of Lot ion of the East half of	of the North qu	arter of tha	it	
of cent	f the East half of the ter line of Ogden Aver	nue in Section	23, Township	39	
	Range 13 East of the ounty, Illinois	Third Princips	il Meridian 1	.n	
7				·   m	
	Ox			S HER	
	Exempt under provisi	ions of Developanti	E . Section	REVENUE STAMPS HE	
	Real Transfer	Tax Act.	, Section	ENGE	
	Date 72	Buyer, Seller o	Representativ		
	au		•	RIDERSTO	
1	•		ď	X 'RIE	
hereby releasing as Illinois. TO HAV	nd waiving all rights under and by E AND TO HOLD said premises	virtu : of ' ie Homestead not in (er ancy in comm	Exemption Laws on on, but in joint tens	Fine State of	CT
	DATED this 31st	day of _ (c) Obs	<u>r</u>	19_73	TO
PLEASE THE	erbert M. Davis	_ (Scal)		(Seal)	
PRINT OR TYPE NAME(S) BELOW		_ (Scal)		(Sea!)	
SIGNATURE(S)					
State of Jillingian Cand State	( in the State aforesaid, DO HE	REBY CERTIFY that	ndersigned a North	ry Public in	1 1
	divorced and not personally known to me to subscribed to the foregoing	be the same person	whose name_15	y in person.	
<b>1989</b>	and acknowledged that		nd delivered the sai	d incomment	
	forth, including the releas		nt of homestead. October	19 73	
Companien expire		n ./	Busum		
24				NOTARY PUBLIC	
U		AD01519 02.5	SHOMAN	AVE	
2,72 W. <del>.c.</del> )	DONAHUE (Nama)	<del>-</del> 1	SIFIOMEN	70-	31
MAIL TOI CHIC	15 CENTRAL PAR AGO GOG23	ONLY AND IS	ODRESS IS FOR STATIST NOT A PART OF THIS DE WENT TAX BILLS TO:	ICAL PURPOSES	2253181S
OR RECORDE	(City, State and Zip)  ER'S OFFICE BOX NO.		(Name)		<b>2</b>
OR KEGOKE	7.00 F 10200X 10		(Address)		
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