UNOFFICIAL COPY

QUIT CLAIM DEED	- 4 MAR 23	PM 1 31	22 668	351		
Statutory (ILLINOIS)		756265			a	Ľ.
(Individual to Individual)			For Recorder's Use			5.1
TACK T	BAIGELMAN, di					
THE CHANGE						
of the Village of Skokie for the consideration of Ten and and other good and v	Aluable cons	Cook .00) ideration NE BAIGELM		linois DOILARS, in hand paid.		
of the Village of Skokle all interest in the following described State of Illinois, to wit	County of I Real Estate situate	Cook d in the County	State of III	linois in the		
The South 3.85 the South 64.8 Company's Seco being a subdiv Section 27, To Third Principa	3 feet thereond Addition tision in the waship 41 Nor	of) in Arti to Howard ' South Wesi th, Range	iur Michel 'L" Subdivi quarter c 13, East c	and Islon of the		
Address of Gra		orth Kenno , Illinois			P. HER	
This ' trumen	t was prepare	4051	e S. Levin Old Orchar e, Illinoi	d Road	M IS TO A	
	500	1AIL			CRIDERS OR REVENUE STAMPS HE	NO TAXAB
iereby releasing and waiving all right- of Illinois.	98	e of the Homest	ead Exemption 1	aws of the State	ALLEN	TAXABLE CONSIDERATION
DATED this	-, -	2× /	Barrie	′		ISIDE
PCFASE PRINT OR	(Seal		BAIGELMAN			RAT
TYPE NAMES) ,	eti		ō
BELOW SIGNATURED	(Seal	'		(Seal)		
tate of Illinois, County of C 0 nd for still County, in the State afore coldition divor	O K Said, DO HEREBY ced and not i	CERTIFY tha	inder igned, a N	cotary Public in ELMAN,		
personally k	nown to me to be the to the foregoing insti ledged that — h e	e same person rument, appeare signed, scaled a	whose name d before me tan- and delivered the se uses and purp	san instrument		
	ing the release and v クレ		ht of homestead.			
CONTRACTOR POLICE STATE OF ILLINOIS		Fore	Lyn	NULLARY PUBLI	O.	
AY COMMISSION EXPIRES MAY 29, 1977 assued thru Illinois Motary Assoc.						155
V -	•	ADDRESS OF P	ROPERTY:	-	DOCUMENT NUMBER	337
LEVINY ROSEN	170		North Ken		EN	3
War Min Ma	choon Pa		ie, Illino		Z	
Address)	11.		ADDRESS IS FOR STA NOT A PART OF THIS JUENT TAX JULES TO	DEED PURPOSES	MBE	
City State and 2) D		(Name)		20	
RECORDER'S OFFICE BOX NO			(Address)		1	