

# UNOFFICIAL COPY

GEORGE E. COLE\*  
LEGAL FORMS

No. 822  
July, 1967

**QUIT CLAIM DEED**

Statutory (ILLINOIS)

(Individual to Individual)

SEP-26-72 5 06 537 • 22064606-A-100

22 064 606

510

The Above Space For Recorder's Use Only

THE GRANTOR Barbara Blake, A Spinster,

of the City of Blue Island County of Cook State of Illinois  
for the consideration of Ten & other good & valuable consideration..DOLLARS.

CONVEY S and QUIT CLAIM S to D. R. G., INC., a corporation organized and  
existing under and by virtue of the laws of the State of Illinois having its  
principal office in the City of Chicago Cook County of Cook  
State of Illinois, to wit

Lot 62 in the Resubdivision of Castle's Subdivision  
of Section 11, Township 39 North, Range 13, lying  
South of Lake Street, East of the Third Principal  
Meridian in Cook County, Illinois.

5.00 MAIL

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

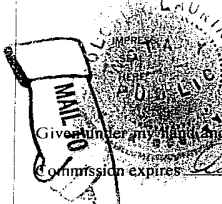
DATED this 4th day of February 1972

PLEASE  
PRINT OR  
TYPE NAME S  
BELOW  
SIGNATURE S

(Seal) *Barbara Blake* (Seal)  
Barbara Blake

(Seal) \_\_\_\_\_ (Seal)

State of Illinois, County of Cook ss. I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that *Barbara Blake, a Spinster,*



personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she signed, sealed and delivered the said instrument to her free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

Given under my hand and official seal, this 4th day of February 1972

Commission expires August 1 1973

*Edward J. Quinn*  
4018 W. Patterson

ADDRESS OF PROPERTY

MAIL TO { D. R. G., INC.  
77 West Washington Street  
Chicago, Illinois }

THE ABOVE ADDRESS IS FOR STATISTICAL PURPOSES ONLY AND IS NOT A PART OF THIS DEED  
SEND SUBSEQUENT FAX BILLS TO

OR RECORDER'S OFFICE BOX NO \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_

ATTN: RIDERS OR REVENUE STAMPS HERE

NO TAXABLE CONSIDERATION

DOCUMENT NUMBER

22064606

END OF RECORDED DOCUMENT