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The gra	CUTOR'S CC 14	1 72 3 No. 84	1900	GEORGE E. C LEGAL FO	IRMS
	antors , ROSELLA I	K. SKAR and FI	RANCINE S. MALK	IN, Co-Executor	8
Breschion	c of the will of ALB	ERT G. SKAR			
	virtue of letters testame		0		
by the C1	rcultco	ourt of Cook	County, State	of_Illinois	
and in exer	cise of the power of sale	granted to them	_in and by said will and	in pursuance of every of	her
			eration of the sum of T	en and no/100	- 1
	00)			ب ب ب بن ف یہ بر مرح گر برجہ کی	
entere or the Probat	ed on November Circuit Court Le Division in	3, 1972, by to of Cook Counthe matter of	pursuant to th he Honorable Ju ty, Illinois, C the Estate of	dge Robert J. I ounty Departmer Albert G. Skar,	unne 50
deceas	ed file numbe	r 70 P 9821,	docket number 7	51 and page num	- 1999 (1999) - 32≱. 75 5
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do nere	by alien, remise, release a	r,d ct nvey untoQES	ONE D. BROAM		EALES THE STATE OF
of the C	ity of	Ch⊥c ago	, County of Coc	ık	No.
State of I	11inois, the fo	ollowing descri ed real	estate situated in the Co	ounty of Cook	
in the State	e of Illinois	, to wit:),		£ 2 8 £ .6 0
	a resubdivision	on of Section	incoton Park a 9, forrship 37		500.00 9:0 .00.00
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STATE OF ILLINOIS SS.		
COUNTY OF COOK		
I, MARTIN S. KOREY		
a notary public in and for said County, in the State a	aforesaid, DO HEREBY CERTIFY that ROSELLA	
K. SKAR and FRANCINE S. MALKIN,	as Co, executors	
of the will of ALBERT G. SKAR	, deceased,	
personally known to me to be the same persons who	se name S subscribed to the foregoing instrument.	
appeared before me this day in person and acknowle	edged that _thoy signed, sealed and delivered the said	
ment as their free and voluntary	act as such executor S., for the uses and purposes therein	
set forth		
GIVE: ur aer my hand and official seal, th	is 20th day of November , 19.72	
NOTARY FUBLIC STATE OF HAMPIN	Mostly Charles	
NOTAR, PUBLIC STATE OF ILLINOIS MY COMMISSION EXPIRES SEPT. 26, 1976 Issued thru I line It lary Assoc.	MIN MIN OF TWING SE	
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T.		
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COOK COUNTY, ILLINOIS FILED FOR RECORD		
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Executor's Deed	PARTY MANY RECORDE E. COLE LEGAL FORMS	
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