UNOFFICIAL COPY

GEORGE E. COLE* No. 808 LEGAL FORMS July, 1967	23 052 82]
WARRANTY DEED	APR 17 M1 10 59
Statutory (ILLINOIS)	MH-17-15 980691 • 23052321 • A Rec 5.1)
(Individual to Individual)	
	(The Above Space For Recorder's Use Only)
THE GRANTOR S ROBERT J. V	VALLACE and DOROTHY WALLACE, his wife
of the City of Chicago	County of Cook State of Illinois 1 NO/ONE HUNDREDS (\$10.00)
and other good and valuable of	consideration in hand paid,
CONVEY and WARRANT to	
of the City of Chicago the following described Real Estate situa	
State of Illinois, to wit:	그는 그는 이 그는 사람들이 없는 사람들이 가지 않는데 그렇게 되었다.
	iver L. Watson's Second Belmont Avenue Chicago in the South East & of Section
19, Township	40 North, Range 13, East of the Third didan, in Cook County, Illinois.
	or provisions of Paragraph . Section 4.
Real Estate	Transfer Tax Act.
<u> 4-17-</u>	75 MININ/// 16/11 1 1 1 2 2 3
Date	Buyor, Ediler of Representative
THIS DOCUMENT PREPARE	D BY:
DAVID P. SAJES, Attori	
77 West Washing on Str Chicago, 111incis 600	con (α μ) (α μ
	DI CONTROL DE LA
	nder and by virtue of the Homestead Exemption Laws of the State
of Illinois.	
DATED this	Capal 1975 Seems
· Post 1 200	
PLEASE ROBERT JUWALLACE	
PRINT OR TYPE NAMEISI DOUTHY Wal	lace (Seal) (Seal)
SIGNATURE(S) DOROTHY WALLACE	(Seal) (Seal)
State of Illinois, County of COOK	ss. 1. the undersigned a Notary Public in
and for said County, in the State aforesaid,	DO HEREBY CERTIFY that ROBLAT J. WALLACE
	wn to me to be the same person_S_ whose nameS
and acknowled	ged that the ey signed, sealed and delivered the sair as, tument free and voluntary act, for the uses and purposes therein set
	the release and waiver of the right of homestead.
Given under my bond and official scal, the	is day of the 17-5
Mumprissidiff expires 3	1079 longhed by musler
♦ ○	16137W/selmar
La control control de la control de participat de la control de la contr	1 75
D	ADDRESS OF PROPERTY, AND GRANTER BOS
MAIL TO JAVID PULLED E	CHICAGO TLINOG 2
MAIL TO: JOW WASHING	
CILICAGO HIL	60602 SEND SUBSEQUENT TAX BILLS TO:
icity State and Zipi	(Name)
OR RECORDER'S OFFICE BOX NO	(Name)

END OF RECORDED DOCUMENT