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	George S. Co									
	LEGAL FOR		September	No. 808 r, 1975				1.	Bidm	R. Ellien
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		Statutory	(III (Note)	رة والم المواود المعادد المعادد	TT, ILLINOIS		011	UTT		
	(Individual to	(ILLINOID)		49 P H '78	(The Above Space	e For Re	corder's Use		41944
70	THE GRANTOR S DELORES FRY and RONALD L. FRY, her husband,									
$\frac{3}{2}$	of the C	ity	of Chica	ago Heio	hesunty ofC	look	State	f Illi:	nois	
i	for and in consideration of Ten and no/100 (\$10.00)									
S	CONVE	Yand	WARRA	NTto_	JOSEPH KR	OL,Jr,abacl	elor,	,	in hand paid,	
Ġ.	1				and Crawfo	NAME AND ADD	oree or	CDANTERNA	s 60430	
		wing describ Illinois, to w		Estate situ	ated in the Cour	nty of Cook	<u> </u>		in	
	Maridi	ian, in	Cook C	county,	Illinois.	hts, in th e 14 East	e Nor of th	th East e Third	1/4 of Principal	00
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	hereby rele of Illinois.	easing and	waiving al	l rights und	er and by virtue	e of the Homest	ead Exe	mption La	ws of the State	# 12
		to: 1)	Covena	ants, co	onditions	and restri	ction	s of re	ecord;	YI4
					taxes for		_	quent ye	_ :	E CO. NO. 016
		DAT	ΓED this .		12	of Septen	ner.	-1	1978	077076
	PLEASE				(Seal	L'Ille	Zas/	SE	(Seal)	E MENAST
1	PRINT OR					Dercres F	ry	~	+>-	
3	TYPE NAME(S) BELOW				(Seal	Renold	77.0	4M)	(Seal)	H 18 1
_	SIGNATURE(S)					Ronald I.	Fry	X		STI SEE
8/2	State of Illi	inois, Coun	ty of <u>CO</u>	ok	ss.	I. the	ur.de.sn	ned, a Not	ary Public in	TEST 65
.4		County, in	the State a	aforesaid, D	O HEREBY C	$ERTIFY$ that $_$	Do. o.	es Fry	and	
18	· δ				to me to be the	~	_ whose	ı.arıe S	are	
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2	3 5	∑ :≂	as	their	_ free and volu	ntary act, for th	ie uses a	and purpos		= 55
, i	: (°)	~ ~/	forth,	including th	ne release and v	vaiver of the rig	ht of ho	mestead.		
	Given unde	14) hand	and officia	d seal, this.	201	day of	Sept	mber	.9.18	
	Commission	n expires	August	28	19 <u>81</u>	Stay	K	tung	NOTARY PUBLIC	50,2
	This instrum	ent was pre	pared by	Joseph :	R. Perozzi	165 W. (NAME AND			icago	
						ADDRESS OF F				DOCUMENT NUMBER
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	MAIL TO: { _				Į.	=	_			N
	-		(Ad	dress)		ONLY AND IS SEND SUBSEC			FICAL PURPOSES	MBE
	ι		(City, Sta	ite and Zip)	J			(Name)		Ħ
•	OR RE	CORDER'S O	FFICE BOX I	NO. 45	7			Address)		

END OF RECORDED DOCUMENT