COOK COUNTY, BLINGED FILLE FEE RECORD

GEORGE E. COLE^{*} LEGAL FORMS

NO. 823 OCTOBER, 1967

QUIT CLAIM DEED

1981 AUS 28 AM 10: 39 2598**2**583 Statutory (ILLINOIS)

Soldrey M. Olsen RECEPTES OF OLEOS

25982583

(Individual to Corporation)

(The Above Space for Recorder's Use Only)

THE GRANTOR Irving Adelman and Sylvia Adelman, his wife	
of the <u>City</u> of <u>Chicago</u> <u>County of <u>Cook</u> <u>State of Illinois</u> for the consideration of <u>Ten Dollars & other good & valuable consider+DOLLARS</u>, at in Mand paid.</u>	
CONVEY and OUT CLAIM to Mount Sinai Hospital Medical Center of	
Chicago an Illinois not-for-profit corporation a corporatior organized and existing under and by virtue of the laws of the State of Illinois	
having its principal office in the <u>City</u> of <u>Chicago</u> County of <u>Cook</u>	
and State of Illinois all interest in the following described Real Estate situated in the County of Cook and State of Illinois, to wit: East 12 feet of Lot 28 and West	
16 feet of Lo. 29 in Block 2 and also Lot 33 in Block 2 in McMahon Subdivision of West Half of the South East Quarter of Section 24,	
Township 39 North, Range 13, East of the Third Principal Meridian.	
in Cook County, Illinois.	
GRANTEE'S ADDRESS: 7/10 West 15th Place - Chicago, IL. 60608	2.
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LAHT ON WILLIAM STATES	
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hereby releasing and waiving all rights under and by virtue of the Homestona Exemption Laws of the State	
hereby releasing and waiving all rights under and by virtue of the Homes of Exemption Laws of the State For Hillinois.	
DATED this 25th day of August 19.81	
PLEASE (SEAL)	
PRINT OR Irving Adelman Type NAME(S)	
BELOW MARINESTAL	
SIGNATURES: Sylvia Adelman	
State of Illinois, County of <u>COOK</u> ss. I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that <u>Trying</u>	
Adelman and Sylvia Adelman, his wife	
OTAR MIPRESS personally known to me to be the same person s whose names are	
SEAL subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, scaled and delivered the said instrument as	
PUBL' their 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 spal, this	
Commission expires (1111) 1934 (1844) RUMLY NOTARY PUBLIC	
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MAIL TO: Mail TO: Mail Applies Mail To Service Mail To S	
Mt. Sinai Hospital Medical Center	
Chianna III (0000	
Chicago, II. 60608	

END OF RECORDED DOCUMENT