No. 822 September, 1975

332 APR 8 #1 10 22 26195923

Statutory (ILLINOIS)

(Individual to Individual)	C (F) : AThe /	Above Space For Recorder's Use Only)	11323	9
THE GRANTOR S JAMES P. and PATRICIA MURRAY max	County of	Cook Surpor Tllings	CILLO	10.00
for the consideration of Ten (\$10 and other good and valua CONVEYand QUIT CLAIM_	0.00) and no/100 ble considerati to JOSEPH v	.on in t	OLLARS. nand paid. Avenue,	
Melrose Park, Illinois				
all interest in the feliciting described I State of Illinois, to wite	Real Estate situated in th	ne County of Cook	_in the	:
10, Township 39	rose, a subdivi	est 59 feet of said Logsion in Sections 2, 3 12, East of the Third (11)	and	
	~			7 2
	Ox	2619592 3	,	S HERE
	Co			NUE STAMPS
	O,			AFFIX "RIDEKS"OR REVENUE ons of Paragraph e te Transfer Act
hereby releasing and waiving all righ of Illinois. THIS IS NOT HO	is under and by virtue of MESTEAD PROPERT	f the Homest and Exemption Laws o	of the State	x "RIDERS" of Par
DATED this	25th day o	of <u>February</u>	_ 19_82	Stons tate
PLEASE James P. V	ercillo, Jr.	Patricia Murray	(Seal)	rovi 1 Es
TYPE NAME(S)			3	e e
SIGNATURE(S)	(Seal) _		(Seal)	nde 1, 1
State of Illinois, County of(and for said County, in the State afo	Cook ss.	I, the undersigned, a Notar	y Public in	Section Section February
Murray personally	ercillo & Patri known to me to be the s	cia Murray married to ame persons whose name s	Jay are	Sec
コーロー SE模 and ackno	wledged that they	ment, appeared before me this day signed, sealed and delivered the said stary act, for the uses and purposes	instrument	
	uding the release and wa	day of February	<u></u>	0
Commission expires/	2- 1984	SAY DOM	MUTARY PUBLIC	
This instrument was prepared by F Melrose Park, Illinois	rancis A. Fanel	11, 1878 Lake Street,		
		Address of Property:		DOCUMENT NUMBER
(Name	,——)	1512 -14 Lake St.		
MAIL TO: (Addre	Į	Melrose Park. TI THE ABOVE ADDRESS IS FOR STATIST ONLY AND IS NOT A PART OF THIS DEL	60160 ICAL PURPOSES ED.	NON NO
(City, State)	ind Zip)	SEND SUBSEQUENT TAX BILLS TO:		罗

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END OF RECORDED DOCUMENT