一〇〇〇 9757年

THE GRANTOR Maurillo C. Moreno and Clara D. Moreno, his wife

of Chicago City County of Cook of the State of . Illinois ____ for and in consideration of Ten_and_no/100_************ DOLLARS, _ in hand paid, - 🗂 CONVEY __ and WARRANT __ to Timoteo Barboza and

1#1111 TRAN 1700 05/11/88 11-27-00 HOMO 4 35 - M - 四科中心企会生等學書 COUR COURTA MECORDER

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DUTCOX BECORDING

(The Above Space For Recorder's Use Only)

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Rosa Barboza, his wife 10929 S. Mackinaw, Chicago, Illinois and Antonio Martinez and Josephine Martinez, his wife (NAMES AND ADDRESS OF GRANTEES)

not in Tenancy in Common, but in JOINT TENANCY, the following described Real Estate situated in the Cook in the State of Illinois, to wit: County of.,

Lot 36 (except the South 17 feet thereof) and all of Lot 37 in Block / i) Russell's Subdivision of the South East 1/4 of the Nort' East 1/4 of Section 18, Township 37 North, Range 15 East of the Third Principal Meridian, in Cook County, Illinois, (

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois. TO HAVE AND TO BOLD said premises not in tenar cy in common, but in joint tenancy forever.

Permanent Real Estate Index Number(s): 26 18 217 068 Address(es) of Real Estate: 10929 S. Mackinaw, Chicago, Illinois Cless (SEAL) PLEASE PRINT OR TYPE NAME(S) _(SEAL) ..(SEAL)

... ss. I, the undersigned, a Notary Public in and for Cook_ said County, in the State aforesaid, DO HEREBY CERTIFY Maurillo C. Moreno and Clara D. Moreno, his wife

> personally known to me to be the same person. S., whose name. S., are... subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the said instrument as their free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

Selices State hand and official seal, this _

instrument was prepared by ___John_T. _Connoy One Walla Sall gastreet , Chicago , 111.

BELOW SIGNATURE(S)

PECORDER'S OFFICE BOX NO. ..

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