STAME TRANSFER NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES. 241 Fernwood Lane JOHN O. KOFOD Glenview, Illinois 60025 Name of Grantee Address Zip 241 Fernwood Lane JOHN O. KOFOD Glenview, Illinois 60025 Name of Taxpayer Address Zip 7235 W. Arcadia

Morton Grove, Illinois

Address

60035

Zip

This conveyance must contain the name and address of the grantee, (Ch.115: 12.1) name and address for tax billing, (Ch.115: 9.2) and name and address of person preparing instrument. (Ch.115: 9.3)

JOHN DI.PRIMA

Name of Person Preparing Deed

STATE OF ILLINOIS SE. COUNTY OF COUN

State aforesaid, DO HEREBY CERTIFY t	I. the undersigned, a Notary Public in and for said County, in Daniel A. Herbert and	the
	da A. Herbert, his:wife	
personally known to me to be the same pe	rsons whose names are subscribed to the foregoing instrum	nent,
appeared before me this day in person a	and acknowledged that they signed, sealed and delivered the	bisa
nstrument as their . free and voluntar	ry act, for the uses and purposes therein set forth, including the release	and
waiver of the right of homestead.		
Given under my hand and notarial seal	this day of august	B <u>8</u> .
(Impress Seal Here)	Notary Public	
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の手上がおよりに呼 べり ドレトル	State of Illinois DEPARTMENT OF REVENUE	
I hereby declare that this doed represent	PTION UNDER REAL ESTATE TRANS! IN TAX ACT is a transaction exempt under provisions of Para paph, Section 4, of	Tthe
ical Estate Transfer Tax Act.		Q o
	Dated this1919	88366328 i
	Signature of Suyer-Seller or their Represents fre	_ පු
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