Joel C. Solomon 1319 W. Nelson Address Name of Person Preparing Deed 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)

Joel & Sheryl Solomon

Joel C. Solomon

Name of Grantee

Name of Taxpayer

1319 W. Nelson

1319 W. Nelson

Address

Address

89344670

60657

Zip

60657

Zip

60657

Zip

UNOFFICIAL COPY

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		STATE OF ILLINOI County of C 0 0	S ss.	-			
-		I, the undersigned, a I	•	c in and f	or said C	ounty, in s	the State
IMPE	ESS.	aforesaid, DO HEREBY CERTIFY that					
SE/		JOEL C. SOLOMON					
HEI	RE	personally known to me to be the same person whose name is sub-					
÷		scribed to the foregoing and acknowledged tha instruments as his poses therein set forth homestead.	t he free a including t	appeared l signed, seand volunta he release	pefore me aled and ary act, for and waiv	this day in delivered the uses were of the	n person, the said and pur- right of
÷		Given under my h		rial seal, t	his 26t	<u>.h</u>	day of
		July	19	89)	<u></u>
My com	mission exp	res,	19	/ pine	sa Too	ettfeel	
			3		My	// Notary	Public
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		St	ate of Illinois	(0,			
DEPARTMENT OF REVENUE STATEMENT OF EXEMPTION UNDER REAL ESTATE TRANSFER TAX ACT							
I her	eby declare that	the attached deed represents a train					•
of the Real	Estate Transfer	1ax Act.		31.	. —	· ·	a
			Datedythis	- del devo	70	19 <u>_</u> 6_	<u>7</u> .
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