

RELEASE OF MORTGAGE OR TRUST DEED
BY CORPORATION (ILLINOIS)

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FOR THE PROTECTION OF THE OWNER, THIS RELEASE SHALL BE FILED WITH THE RECORDER OF DEEDS OR THE REGISTRAR OF TITLES IN WHOSE OFFICE THE MORTGAGE OR DEED OF TRUST WAS FILED.

COX 3082
EVAL AMBERBUTE
OL NEMO
MICRO RECOVERS

Above Space For Recorder's Use Only

KNOW ALL MEN BY THESE PRESENTS, That HealthCare Associates Credit Union

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of the County of Page and State of Illinois for and in consideration of the payment of the indebtedness secured by the Mortgage hereinafter mentioned, and the cancellation of all the notes thereby secured, and of the sum of one dollar, the receipt whereof is hereby acknowledged, do hereby REMISE, RELEASE, CONVEY, and QUIT CLAIM unto (NAME AND ADDRESS) Adbiel C. Barcebal and Florence S. Barcebal, his wife as joint tenants heirs, legal representatives and assigns, all the right, title, interest, claim or demand whatsoever they may have acquired in, through or by a certain Mortgage bearing date the 3 day of June , 19 88, and recorded in the Recorder's Office of Cook County, in the State of Illinois, in book of records, on page , as document No. 89095927 , to the premises therein described as follows, situated in the County of Cook , State of Illinois, to wit:

LOT 18 IN NOTTINGHAM SQUARE SUBDIVISION, A SUBDIVISION OF PART OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 31, TOWNSHIP 38 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

COOK COUNTY, ILLINOIS

1991 SEP 25 PM 2:20

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together with all the appurtenances and privileges thereunto belonging or appertaining.

Permanent Real Estate Index Number(s): 19-31-312-028

Address(es) of premises: 7116 W. 86th Street

Witness s hand s and seal , this 29 day of May 1991

[Signature] (SEAL)
Daniel J. Vaughan - President
[Signature] (SEAL)
Sandra Williams - Assistant Secretary

Michael S. Scjvall - HealthCare Associates C.U.

This instrument was prepared by (NAME AND ADDRESS)

7301199 OP

RELEASE DEED
By Corporation

UNOFFICIAL COPY

TO
MAIL TO:
ADVANCE BANK, F.S.B.
2320 Thirteenth Road, El. 60438

ADDRESS OF PROPERTY:

MAIL TO:

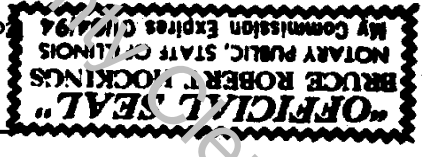
HEALTHCARE ASSOCIATES
Credit Union
1151 East Waukegan Road
P.O. Box 3333
Mokena, Illinois 60458-7033

GEORGE E. COLE
LEGAL FORMS

Property of Cook County

BOX 333

28066416



Notary Public
Bruce R. Hockings
11/1/94
Commission Expires

I, Bruce Robert Hockings, a notary public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that Daniel J. Vaughan, President of HealthCare Associates Credit Union, Illinois, and Sandra Williams, Assistant Secretary of said corporation, and personally known to me to be the Assistant Secretary of said corporation, and personally known to me to be the same persons whose names are subscribed to the foregoing instrument, appeared before me this day in person and severally acknowledged that as such President and Assistant Secretary, they signed and delivered the said instrument and caused the corporate seal of said corporation to be affixed thereto, pursuant to authority given by the Board of Directors of said corporation, as their free and voluntary act, and as the free and voluntary act of said corporation, for the uses and purposes therein set forth.

GIVEN under my hand and Notarial seal this 29 day of May 19 91

STATE OF Illinois }
COUNTY OF DuPage }
SS.