

# UNOFFICIAL COPY

NO 822  
June 1993

CAUTION: Consult a lawyer before using or acting under this form. Neither the publisher nor the seller of this form makes any warranty with respect thereto, including any warranty of merchantability or fitness for a particular purpose.

THE GRANTOR(S)

Eduardo Salazar, Deceased and  
Emma Salazar, his wife

of the City \_\_\_\_\_ of Chicago County of Cook  
State of Illinois for the consideration of  
Ten DOLLARS,  
and other good and valuable considerations

\_\_\_\_\_ in hand paid,  
CONVEY(S) \_\_\_\_\_ and QUIT CLAIM(S) \_\_\_\_\_ to  
Emma Salazar and Carlos Salazar, her son  
4451 N. Avers, Chicago, Illinois  
(NAME AND ADDRESS OF GRANTEE)

all interest in the following described Real Estate, the real estate situated in Cook County, Illinois,  
commonly known as 4451 N. Avers, Chicago, IL, (st. address) legally described as:

LOT 6 (EXCEPT THE NORTH 26/100THS FEET THEREOF AND EXCEPT  
THE SOUTH 19.87 FEET AND EXCEPT THE EAST 8 FEET THEREOF)  
IN BLOCK 4 IN PEARSON AND KINNES ADDITION TO IRVING PARK,  
A SUBDIVISION OF THE SOUTH 1/2 OF THE SOUTH WEST 1/4 OF THE  
NORTH WEST 1/4 OF SECTION 14, TOWNSHIP 40 NORTH, RANGE 13,  
EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Exempt under Real Estate Transfer Tax Act Sec. 4

Par. E & Cook County Ord. 95104 Par. E

Date 6-29-94

Sign: Jonathan A. [Signature]

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

Permanent Real Estate Index Number(s): 13-14-124-004

Address(es) of Real Estate: 4451 N. Avers, Chicago, Illinois

DATED this: 16th day of June 19 94

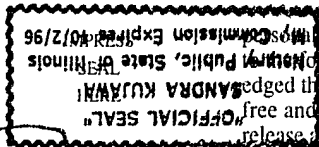
PLEASE  
PRINT OR  
TYPE NAME(S)  
BELOW  
SIGNATURE(S)

Emma Salazar (SEAL)

\*Deceased\* (SEAL)

Eduardo Salazar (SEAL)

State of Illinois, County of Cook ss. I, the undersigned, a Notary Public in and for  
said County, in the State aforesaid, DO HEREBY CERTIFY that



\_\_\_\_\_ is known to me to be the same person \_\_\_\_\_ whose name is subscribed  
to the foregoing instrument, appeared before me this day in person, and acknowl-  
edged that she signed, sealed and delivered the said instrument as her  
free and voluntary act, for the uses and purposes therein set forth, including the  
release and waiver of the right of homestead.

Given under my hand and official seal, this 18th day of June 19 94

commission expires 10/2/96 19 96 Sandra Kujawa  
NOTARY PUBLIC

This instrument was prepared by Fawell & Fawell, 2100 Manchester Rd., #101,  
Wheaton, IL 60187 (NAME AND ADDRESS)

Prepared  
by and  
MAH 110

Mr. Robert White  
Fawell & Fawell  
(Name)  
2100 Manchester Road, #101  
(Address)  
Wheaton, IL 60187  
(City, State and Zip)

SEND SUBSEQUENT TAX BILLS TO  
Mrs. Emma Salazar  
(Name)  
4451 N. Avers  
(Address)  
Chicago, IL 60625  
(City, State and Zip)

DEPT-01 RECORDING \$25.50  
T#2222 TRAN 4732 06/30/94 11:00:00  
#4700 # KB #94-574157  
COOK COUNTY RECORDER

DEPT-01 RECORDING \$25.50  
T#2222 TRAN 4732 06/30/94 11:00:00  
#4700 # KB #94-574157  
COOK COUNTY RECORDER  
**94574155**

(The Above Space For Recorder's Use Only)

AFFIX "RIDERS" OR REVENUE STAMPS HERE

94574157

25.50  
DWH

Quit Claim Deed

INDIVIDUAL TO INDIVIDUAL

TO

Property of Cook County Clerk's Office

GEORGE E. COLE®  
LEGAL FORMS

94574157

DEC 14 1992 1574157  
VCLAYCARE

STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO

I, VIRGINIA L. PARKER, N.B.A. LOCAL REGISTRAR OF VITAL STATISTICS OF THE CITY OF CHICAGO, DO HEREBY CERTIFY THAT I AM THE KEEPER OF THE RECORDS OF BIRTHS, STILLBIRTHS AND DEATHS FOR THE CITY OF CHICAGO BY VIRTUE OF THE LAWS OF THE STATE OF ILLINOIS AND THE ORDINANCES OF THE CITY OF CHICAGO; THAT THE ACCOMPANYING CERTIFICATE ON THIS SHEET IS A TRUE COPY OF A RECORD KEPT BY ME IN PURSUANCE OF SAID LAWS AND ORDINANCES.

THIS CERTIFIED COPY VALID WHEN MULTICOLOR SIGNATURE SEAL IS AFFIXED.

STATE OF ILLINOIS  
MEDICAL CERTIFICATE OF DEATH  
STATE FILE NUMBER 622481

REGISTRATION DISTRICT NO. 16.10  
REGISTERED NUMBER

DECEASED - NAME FIRST MIDDLE LAST SEX AGE LAST BIRTH YEAR MONTH DAY HOURS MINUTES DATE OF BIRTH MONTH DAY YEAR DATE OF DEATH MONTH DAY YEAR

EDUARDO SALAZAR M 58 83 54 09 15 04 DEC 8 1992

CITY, TWP, TWP, ROAD DISTRICT NUMBER CHICAGO

EDUCATION (HIGHEST GRADE ATTAINED) COLLEGE

INDUSTRY (BUSINESS OR INDUSTRY) RETIRED

RESIDENCE (STREET AND NUMBER) 2835 W. Montrose Ave

STATE ILL

FATHER - NAME FIRST MIDDLE LAST MIGUEL SALAZAR

MOTHER - NAME FIRST MIDDLE LAST LINES BAUGHTER

17A. ELSA KRAVYS

18. PART I

19. CAUSE OF DEATH (FIND CAUSE OF DEATH) (a) acute myocardial infarction (b) acute coronary artery disease (c) cerebral aneurysm rupture

20. DATE OF OPERATION, IF ANY

21. TIME AND PLACE OF DEATH

22. SIGNATURE OF PHYSICIAN

23. SIGNATURE OF PHYSICIAN FOR THE CHICAGO DEPARTMENT OF HEALTH

24. GUSTAVE VILLATE, M.D. 2835 W. Montrose Av Chgo

25. HENSON & PARK FUNERAL HOME, 3224 W. Montrose Ave Chicago, IL 60618

26. SIGNATURE OF PHYSICIAN FOR THE CHICAGO DEPARTMENT OF HEALTH

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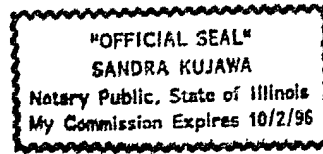
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## STATEMENT BY GRANTOR AND GRANTEE

The grantor or his agent affirms that, to the best of his knowledge, the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire title to real estate under the laws of the State of Illinois.

Dated June 18, 1994 Signature: Emilia Salazar  
Grantor or Agent

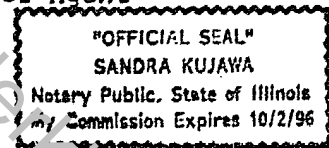
Subscribed and sworn to before me by the said \_\_\_\_\_ this 18th day of June, 1994.  
Notary Public Sandra Kujawa



The grantee or his agent affirms and verifies that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire and hold title to real estate under the laws of the State of Illinois.

Dated June 18, 1994 Signature: Emilia A. Salazar  
Grantee or Agent

Subscribed and sworn to before me by the said \_\_\_\_\_ this 18th day of June, 1994.  
Notary Public Sandra Kujawa



NOTE: Any person who knowingly submits a false statement concerning the identity of a grantee shall be guilty of a Class C misdemeanor for the first offense and of a Class A misdemeanor for subsequent offenses.

(Attach to deed or ABI to be recorded in Cook County, Illinois, if exempt under the provisions of Section 4 of the Illinois Real Estate Transfer Tax Act.)

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