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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.

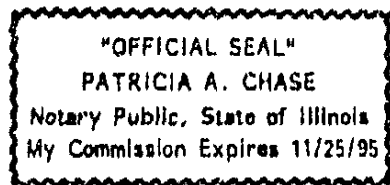
Given under my hand and notary seal, this 13 day of

June, 1995.

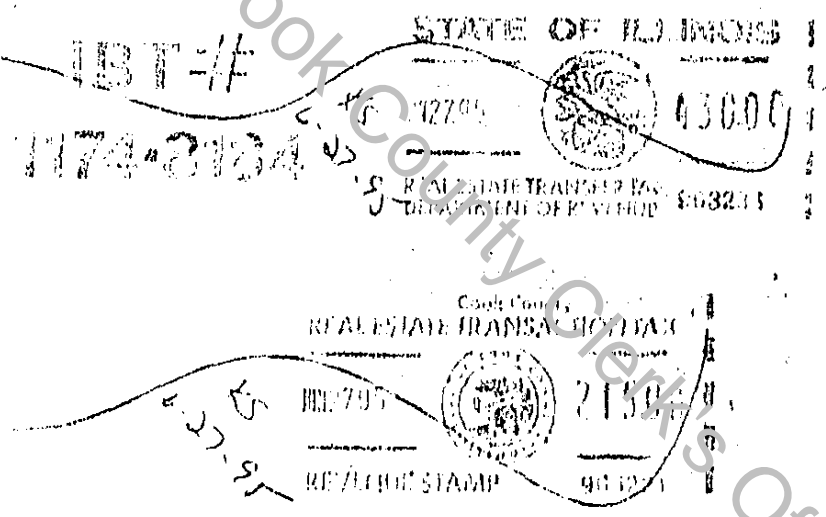
Patricia A. Chase Notary Public

(seal)

My commission expires _____



COUNTY - ILLINOIS TRANSFER STAMPS
Prepared By:
Donna G. Kogut
7375 West North Avenue
River Forest



95424349

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FILED JUN 26 1995

[Signature]
INITIALS

CLERK OF COUNTY TREASURER

51827

MAPPING SYSTEM

Change of Information Form

Scannable document - read the following rules

- 1 Changes must be kept within the space limitations shown
- 2 Do Not use punctuations
- 3 Print in CAPITAL letters with black pen only
- 4 Do Not Xerox form
- 5 Allow only one space between names, numbers, and addresses

SPECIAL NOTE:

- If a TRUST number is involved, it must be put with the NAME, leave one space between the name and number
- If you don't have enough room for your full name, just your last name will be adequate
- Property Index numbers (PIN) must be included on every form

PIN NUMBER:

15 - 01 - 216 - 040 -

NAME/TRUST#:

DR ANGEL G GALVEZ

MAILING ADDRESS:

1219 JACKSON AVENUE

CITY:

RIVER FOREST STATE: IL

ZIP CODE:

60305 -

PROPERTY ADDRESS:

1219 JACKSON AVENUE

CITY:

RIVER FOREST STATE: IL

ZIP CODE:

60305 -

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11/15/2011