

# UNOFFICIAL COPY

95454897

GEORGE E. COLE  
LEGAL FORMS

No 229  
November 1994

## QUIT CLAIM DEED—JOINT TENANCY Statutory (Illinois) (Individual to Individual)

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) Claude Smith

of the City Chicago of Cook 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

Tracey Smith, 1515 S. Kolin, Chicago, Illinois and Claude Smith, 6739 S. Harper Street, Chicago, Illinois

(Name and Address of Grantee)

not in Tenancy in Common, but in **JOINT TENANCY**, all interest in the

following described Real Estate situated in Chicago, Cook

County, Illinois, commonly known as 1515 S. Kolin St.

(Street / Address)

legally described as:

Lot 6 in Block 6 in Tabor's Subdivision of Blocks 5, 6, 9, 10, 11 and 12 in the Subdivision by L. C. P. Freer (as Receiver) of the West 1/2 of the Northeast 1/4 of Section 22, Township 39 North, Range 13, East of the 3rd Principal Meridian in Cook County, Illinois.

DEPT-01 RECORDING \$27.50  
R DEPT-01 RECORDING \$27.50  
T#7777 TRAM 5089 07/13/95 13:48:00  
#9351 + SK # -95-454897  
COOK COUNTY RECORDER

Above Space for Recorder's Use Only

95454897

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois. TO HAVE AND TO HOLD said premises not in tenancy in common, but in joint tenancy forever.

Permanent Real Estate Index Number(s): 16-22-224-006-0000

Address(es) of Real Estate: 1515 S. Kolin Street, Chicago, Illinois

DATED this: 13th day of July 19 95

Please print or type name(s) below signature(s)

x Claude Smith (SEAL) \_\_\_\_\_ (SEAL)  
Claude Smith  
\_\_\_\_\_  
\_\_\_\_\_  
(SEAL) \_\_\_\_\_ (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 Claude Smith

**OFFICIAL SEAL** personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he signed, sealed and delivered the said instrument as his and voluntary act, for the uses and purposes therein set forth, including the release and termination of the right of homestead.

PAUL S. SHAPIRO  
NOTARY PUBLIC, STATE OF ILLINOIS  
MY COMMISSION EXPIRES ON 7/27/97

*Handwritten initials/signature*

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Given under my hand and official seal, this 13th day of July 19 78

Commission expires \_\_\_\_\_ 19 \_\_\_\_\_

*Paul S. Shapiro*  
NOTARY PUBLIC

This instrument was prepared by Paul S. Shapiro, 123 W. Madison, Chicago, Illinois 60602  
(Name and Address)

CLAUDE SMITH

(Name)

MAIL TO:

1119 S. HARPER ST.

(Address)

CHICAGO, ILL. 60619

(City, State and Zip)

OR RECORDED OFFICE BOX NO. \_\_\_\_\_

SEND SUBSEQUENT TAX BILLS TO:

TRACEY SMITH

(Name)

1515 S. KOLIN

(Address)

CHICAGO, ILL. 60623

(City, State and Zip)

Exempt under Real Estate Transfer Tax Law 38 ILCS 200/1-45  
Ill. par. \_\_\_\_\_ and Cook County Ord. 67-0-27 par. \_\_\_\_\_

Date \_\_\_\_\_ Sign \_\_\_\_\_

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GEORGE E. COLE  
LEGAL FORMS

TO

Quit Claim Deed  
JOINT TENANCY  
INDIVIDUAL TO INDIVIDUAL

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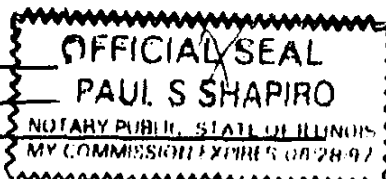
STATEMENT OF GRANTEE OR AGENT

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 July 13, 1995 Signature: Claude Smith  
Grantor or Agent

Subscribed and sworn to before me by the said Claude Smith this 13th day of July 1995.

Notary Public Paul Shapiro



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 July 13, 1995 Signature: Claude Smith  
Grantee or Agent  
95454897

Subscribed and sworn to before me by the said Claude Smith this 13th day of July 1995.

Notary Public Paul Shapiro



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.)

DEPARTMENT OF HEALTH - CITY OF CHICAGO

STATE OF ILLINOIS  
COUNTY OF COOK  
CITY OF CHICAGO

FEB 10 1995

I, SHEILA WYNE RSW LOCAL  
REGISTERAR 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  
MULTICOLORED SIGNATURE SEAL IS  
AFFIXED.

95454897

STATE OF ILLINOIS  
MEDICAL CERTIFICATE OF DEATH

REGISTRATION DISTRICT NO. 6-10  
REGISTERED NUMBER 6-10

DECEASED NAME: ANNIE F. SMITH  
LAST NAME: SMITH  
AGE: 56  
SEX: FEMALE  
DATE OF BIRTH: FEBRUARY 6, 1905  
DATE OF DEATH: AUGUST 25, 1990

RESIDENCE: 1515 S. KOLIN  
CITY: CHICAGO  
STATE: ILLINOIS  
COUNTY: COOK

CAUSE OF DEATH: ACUTE CORONARY ARTERY DISEASE  
SPECIFY: NONE

SIGNATURE OF PHYSICIAN: [Signature]

DATE OF SIGNATURE: FEB 10 1995

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SPECIFY: NONE

SIGNATURE OF PHYSICIAN: [Signature]

DATE OF SIGNATURE: FEB 10 1995