95493553

WAISRANTY DEED Statutory (H.L.INOIS) (Individual to Individual)

> SELECTION OF BRIDERIC 1416/11 16/6N 1404 02 25795 07:54:00 \$1940 HE R. SPN 4930053 COME CHARLE OF CORDER

15630100 /

THE GRANTOR(S): MICHAEL D. SCHMIDT and DIANA J. SCHMIDT, his wife, of the City of Chicago, County of Cook, State of Illinois, for and in consideration of Ten and no/00 (\$10.00) Dollars in Fand paid.

CONVEY(S) AND WARRANT(S) to: MARK A. SCHMIDT, 5630 West 63rd Place, Chicago, Illinois 60638, the following described Real Estate situated in the County of Cook in the State of Illinois, to wit.

LOT 25 IN BLOCK 7 IN THE 41H ADDITION TO CLEARING BEING A SUBDIVISION OF THE SOUTH 3.4 OF THE WEST 1.2 OF THE SOUTHEAST 1.4 OF SECTION 17, TOWNSHIP 38 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Subject to. Covenants, conditions and restrictions of record and general real estate taxes for the year 1994 and subsequent years

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

Permanent Index No.::

19-17-418-016

Address of Real Estate:

6147 South Mayfield, Chicago, Iílínois 60638

Dated this 25 day of July 1995

Telsal & Ally & INTAL DIANA J. SCHMIDT INFALL

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BOX 333-CTI

Property of Cook County Clerk's Office

STATE OF ITEMOIS)

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(COUNTY OF COOK.)

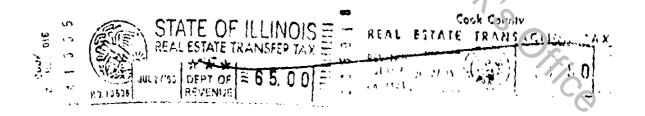
I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that MICHAEL D. SCHMIDT and DIANA J. SCHMIDT, are personally known to me to be the same person (s) whose name(s) are subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the 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.

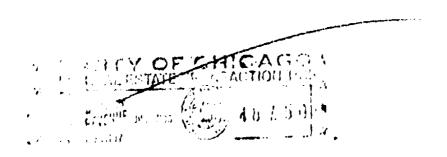
| Given under my ha | garantullicial scal this | 2.5 day of | 1064 | 11) 95 |
|-------------------|---|----------------|--------------|---|
| Commission expire | OFFICIAL SEA CÉRALO J SRAMES NOTARY PLBLE STATE OF ILL MY COMMISSION EXPIRES ION | لا الله الإسال | leafe. | |
| | | was. | | in and an an and and and and an |
| THIS INSTRUME | NI PRIPAREDITE H | AKKELL SKA | MEAL & JASIN | SKI, 6446 West 127th |

HHS INSTRUMENT PREPARED PT BARRETT, SRAMEK & JASINSKI, 6446 West 127th Street, Palos Heights, Illinois 60463

MAH TO: MARK A. SCHMIDT, 6147 Scath Mayfield, Chicago, Illinois 60638

MAH, SUBSEQUENT TAX BILLS TO: MARK A SCHMIDT, 6147 South Mayfield, Chicago, filinois 60638





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UNOFFICIAL COPY MAP SYSTEM

CHANGE OF INFORMATION FORM

| | READ THE FOLLOWING RULES |
|--|---|
| Changes must be kept in the space limitations shown DO NOT use punctuation | Print in CAPITAL LETTERS with BLACK PEN ONLY Allow only one space between names, numbers and addresse |
| SPEC | CIAL NOTE: |
| If you do not have enough room for you | h the NAME, leave one space between the name and number or full name, just your last name will be adequate duST BE INCLUDED ON EVERY FORM |
| PII 19-11-41 NAME MARKASCHI | V: 8-016-0000 |
| STREET NUMBER STREET NOT STATE: ZIP: | ADDRESS: NAME - APT or UNIT FIELD 638- |
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