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WAFIRANTY DE Statutory (ILLINOIS) (General)

CAUTION. Correll' a lawyer before using or acting under this form. Neither the publisher nist the seller of this form makes any warranty with respect thereto, including any warranty of murchantability or fitness for a particular purpose.

THE GRANTOR (NAME AND ADDRESS) William P. Kelly, 170 Tremont, # 203, Boston, Massachusetts and Mary Kelly Gross, his wife, 419 W. Wellington

(The Above Space For Recorder's Use Only)

		<u> </u>	(1,101,101,101,101,101,101,101,101,101,1		
of the Ci	ty.		of Chicago		County
of					
for and in c	onsideration of Ten (\$	10.00)	DOLLARS and	other good and va	luable
in hand paid	I. CONVEY and WAR	RANT to			eration
intirety ar	ffrey I. Gauls and 3100 N. Sheridan Cook and State	n Ka., #12E of Illinois	City of Chi	, his wife as tenant Lcago, County	s by the
the following	a described Real Estate situ			in the State of Illi	nois, to wit:
(See reverse Exemption I the foluse and conditions are conditional conditions.	side for legal description.) Laws of the State of Illinois lowing if any pro- enjoyment of the ons and restricts governmental tax	hereby chasing s. SUBJECT TO ovided the e property ions of rec ses or asse	and waiving all rights: General taxes for leading to not in a Condominate of public assects for i	ts under and by virtue of the 1994 and subsequent interfere with Purvium: covenants, and utility easement mprovements not years or assessments mortes.	e Homestead years and chasers nts; et
					age.
Address(es)	of Real Estate: 419 W.	Wellington.	Unit #1. Chicago		<u> </u>
PLEASE PRINT OR	William P. Kelly	D	ATED this 23' (SEAL) Mary Ke	day of SULT	(SEAL)
TYPE NAME(S) BELOW SIGNATURE(S)			(SEAL)	hilly had	(SEAL)
State of Illinois, County of Cook ss. I, the undersigned, a Notary Fuelic in and for said County, in the State aforesaid, DO HERBRY CERTIFY that					
Notary Put My Commission ALE Notary Put My Commission	DON W. PATT SI Dic, State of Hilinels an sion Expires 10/27/95 in	ubscribed to the land acknowledged astrument as the lerein set forth, in this	foregoing instrument, I thatt_ h ey_ neirfree and vol ncluding the release: 3	ame persons whose name appeared before me this day signed, sealed and deliver luntary act, for the uses are and waiver of the right of he hot waiver	y in person, ed the said nd purposes omestead.
			<u> </u>		

PAGE 1

SEE REVERSE SIDE > 2/.9

Tegal Bescription

of premises commonly known as 419 W. Wellington, Unit #3, Chicago, Illinois 60657

UNIT 3 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN 419 WELLINGTON CONDOMINIUM AS DELINEATED AND DEFINED IN THE DECLARATION RECOFLE) AS DOCUMENT NUMBER 24263059, AS AMENDED FROM TIME TO TIME; IN THE EAST 1/2 OF THE NORTHWEST 1/4 OF SECTION 23, TOWNSHIP 40 NORTH, RANGE 14, TTR.
Ship Or Coop County EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.



James V. Inendino & Associates, P.C.

Three First National Plaza, Suite 360

60602

(City, State and Zip)

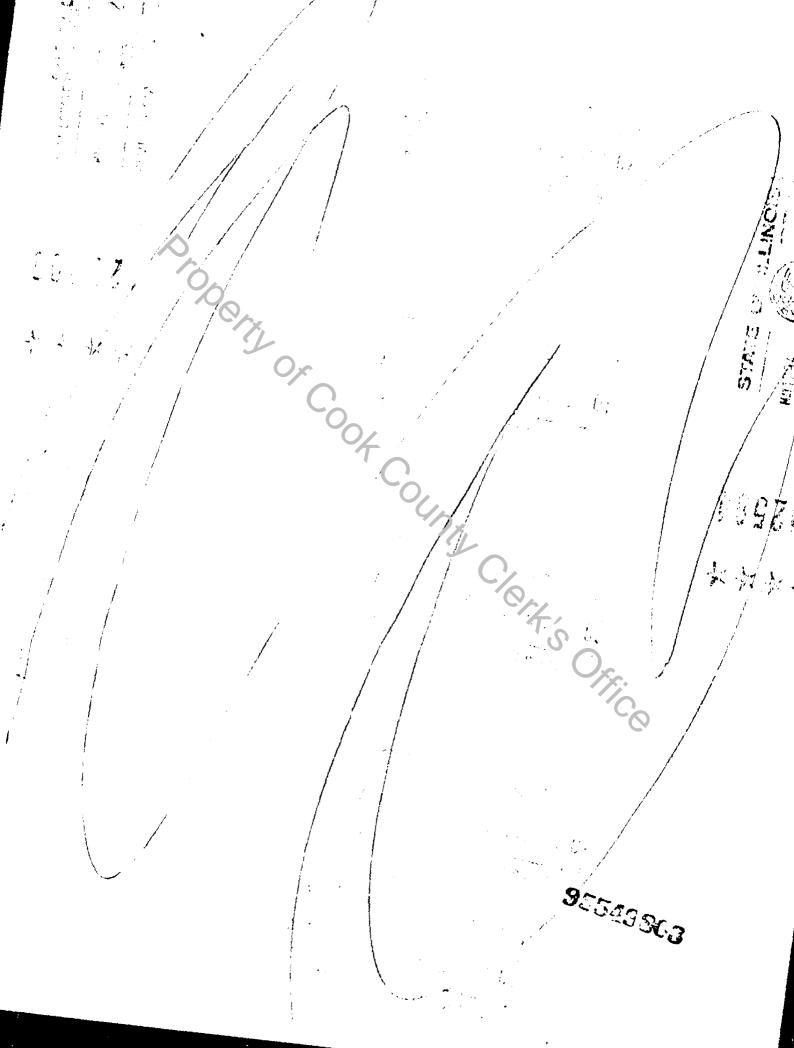
RECORDER'S OFFICE BOX NO. .

PAGE 2

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MAP SYSTEM

CHANGE OF INFORMATION FORM

INFORMATION TO BE CHANGED

Use this form for name/address desired on real property tax record of Cook County Illinois. It is also to acquire PROPERTY **ADDRESSE**

Such change: ba initials, numl EN rmis ONLY! This must be retu

If a TRUST single last na on every form

ES for each PIN in our records.
s must be kept within the space limitations shown. Do Not use punctuation. Allow one space between names a bers and street names, and unit or apt numbers. PLEASE PRINT IN CAPITAL LETTERS WITH BLACK PLS is a SCA NABLE DOCUMENT - DO NOT XEROX THE BLANK FORM. All completed ORIGINAL forned to your supervisor or Jim Davenport each day.
number is involved, it must be put with the NAME. Leave a space between the name and the trust number. A me is adequate if you don't have enough room for the full name. Property index numbers MUST be included in.
On PIN:
14-28-113-032-1004
NAME
Jeffrey I Gaule
MAILING ADDRESS:
STREET NUMBER STREET NAME = APT or UNIT
419 W WELLINGTON #3
CITY
CHICAGO
STATE: ZIP:
IL 60657-
PROPERTY ADDRESS:
STREET NUMBER STREET NAME = APT or UNIT
419 W WELLINGTON #3 1
CITY
STATE: ZIP:
STATE: ZIP:
IL 60657-

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