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GEORGE E. COLE
LEGAL FORMS

No. 806
November 1994

WARRANTY DEED 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.

95556687

THE GRANTOR Joseph Radice married to
* Rose Marie Radice

of the Village of Elmwood Park County of Cook
State of Illinois for and in consideration of

DEPT-01 RECORDING \$27.50
T:0010 TRAN 2470 08/22/95 15:55:00
#6059 CJ *-95-556687
COOK COUNTY RECORDER

\$10.00 (Ten Dollars and 00/100ths) DOLLARS,

and other good and valuable considerations _____
Cash in hand paid,

CONVEY _____ and WARRANT _____ to
Raymond Bolden
5415 W. Kamerling
Chicago, IL 60651
the following described Real Estate situated in the County of Cook

Above Space for Recorder's Use Only

See Attached Exhibit "A" Legal Description

*This is not homestead property of the Grantor's spouse.

1st AMERICAN TITLE order # C8550 1 of 1

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

SUBJECT TO: covenants, conditions, and restrictions of record,

Document No.(s) _____;

_____ and to General Taxes for _____ and subsequent years.

Permanent Real Estate Index Number(s): 16-09-411-020

Address(es) of Real Estate: 224 N. LaCross, Chicago, IL 60644

Dated this 17th day of August, 19 95.

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

Joseph Radice (SEAL) _____ (SEAL)

_____ (SEAL) _____ (SEAL)

272 ✓

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Warranty Deed

Individual to Individual

TO

GEORGE E. ... LEGAL FORMS

RECEIVED JUN 1996 ... 48, 1996

PROPERTY OF COOK COUNTY CLERK'S OFFICE

STATE OF ILLINOIS ... NOTARY PUBLIC

State of Illinois, County of Cook

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that

Joseph Radice married to Rose Marie Radice

"OFFICIAL SEAL" REBECCA A. STEWART Notary Public, State of Illinois My Commission Expires 10/07/97

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 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 17th day of August 19 95

Commission expires 10-7-97 19

Signature of Notary Public

NOTARY PUBLIC

This instrument was prepared by Pepe Colon, 10 S. LaSalle #300, Chicago, IL 60603 (Name and Address)

SEND SUBSEQUENT TAX BILLS TO:

MAIL TO:

Raymond Bolden (Address) 5415 W. Kamerling

Same as across (Name)

(Address)

(City, State and Zip)

Chicago, IL 60651

(City, State and Zip)

OR

RECORDER'S OFFICE BOX NO.

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PROPERTY LEGAL DESCRIPTION

EXHIBIT "A"

LOT 45 IN BLOCK 5 IN THE RESUBDIVISION OF BLOCKS 5, 6, 7 AND 8 AND VACATED ALLEYS ALL IN DERBY'S SUBDIVISION OF THE EAST HALF OF THE SOUTH EAST QUARTER (EXCEPT EAST 5 ACRES) OF SECTION 9, TOWNSHIP 39 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

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MAP SYSTEM
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CHANGE OF INFORMATION FORM

SCANABLE DOCUMENT - READ THE FOLLOWING RULES

Changes must be kept in the space limitations shown
DO NOT use punctuation

3. Print in CAPITAL LETTERS with BLACK PEN ONLY
4. 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 do not have enough room for your full name, just your last name will be adequate

Property index numbers (PDN #) MUST BE INCLUDED ON EVERY FORM

PIN:

16 - 09 - 411 - 020 - [] [] [] []

NAME

R A Y M O N D B A I D E N [] [] [] [] [] [] [] [] [] []

MAILING ADDRESS:

STREET NUMBER STREET NAME = APT or UNIT

224 NORTH LACROSSE [] [] [] [] [] [] [] [] [] []

CITY

C H I C A G O [] [] [] [] [] [] [] [] [] []

STATE:

I L [] [] [] [] [] [] [] [] [] []

ZIP:

60623 - [] [] [] [] [] [] [] [] [] []

PROPERTY ADDRESS:

STREET NUMBER STREET NAME = APT or UNIT

224 NORTH LACROSSE [] [] [] [] [] [] [] [] [] []

CITY

C H I C A G O [] [] [] [] [] [] [] [] [] []

STATE:

I L [] [] [] [] [] [] [] [] [] []

ZIP:

60623 - [] [] [] [] [] [] [] [] [] []

AUG 22 1995
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