TRUSTEE'S DEED

95650243

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THIS INDENTURE, made this 13TH
day of SEPTEMBER , 1995 ,
between AMERICAN NATIONAL BANK AND
TRUST COMPANY OF CHICAGO, a National
Banking Association, duly authorized to ac-
cept and execute trusts within the State of
Illinois, not personally but as Trustee under
the provisions of a deed or deeds in trust duly
recorded and delivered to said Bank in pursu-
ance of a certain Trust Agreement, dated
the 17TH DAY OF APRIL, 1989
known as Trust Number 108837-00
party of the first part, and
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DEPT-01 RECORDING	\$25.50
	09/27/95 15:04:00
	-95-656243
COOK COUNTY RE	CORDER

(Reserved for Recorders Uso Only)

JOHN W. HARDEN, (6/)3 SOUTH 2ND AVENUE, MAYWOOD, ILLINOIS

4/183942

party/parties of the second part.

WITNESSETH, that said party of the first part, in consideration of the sum of

Dollars and other good and valuable consideration in hand paid, does _____(\$10.00) ____ Dollars and other good and valuable consideration in hand paid, does hereby convey and QUIT-CLAIM unto said party/parties of the second part, the following described real estate, situated County, Illinois, to-wit: ČOOK

SEE ATTACHED LEGAL DESCRIPTION

95650243

1603 SOUTH 2ND AVENUT MAYWOOD, ILLINOIS Commonly Known As.

15-14-155-019 Property Index Number. together with the tenements and appurtenances thereunto belonging.

TO HAVE AND TO HOLD, the same unto said party of the second part, and to the proper use, benefit and behoof,

forever, of said party of the second part.

This deed is executed by the party of the first part, as Trustoe, as aforesaid, pursuant to and in the exercise of the power and authority granted to and vested in it by the terms of said Peod or Deeds in Trust and the provisions of said Trust Agreement above mentioned, and of every other power and authority there into enabling. This deed is made subject to the liens of all trust deeds and/or mortgages upon said real estate, if any recorded or registered in said county.

IN WITNESS WHEREOF, said party of the first part has caused its corporate seal to be hereto affixed, and has

caused its name to be signed to these presents by one of its officers, the day are year first above written.



AMERICAN NATIONAL BANK AND TRUST COMPANY OF CHICAGO as Trustee, as aloresaid, and not personally

MANSEN, SECOND VICE PRESIDENT

STATE OF ILLINOIS COUNTY OF COOK

L. M. SOVIENSKI

, a Notary Public in and for PETER H. JOHANSEN

said County, in the State aforesaid, do hereby certify an officer of American National Bank and Trust Company of

Chicago 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 said officer of said association signed and delivered this instrument as a free and voluntary act, for the uses and purposes therein set forth.

GIVEN under my hand and seal this

SEPTEMBER

OFFICIAL SEAL NOTARY PUBLIC, STATE OF ILLINOIS NOTARY PUBLIC

My Commission Expires 06/27/96

PETER H. JOHANSEN

Prepared By: American National Bank & Trust Company of Chicago MAIL TO:

75.50012

AND JOSE

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Property of Cook County Clerk's Office

Legal description of property:

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THE SOUTH 13.50 FEET OF LOT 2 AND ALL OF LOT 3 IN BLOCK 182 IN MAYWOOD, A SUBDIVISION OF SECTIONS 2, 11 AND 14, TOWNSHIP 39 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P-I.N.: 15-14-155-019

SUBJECT TO: Covenants, conditions, restrictions of record and general real estate taxes for the year 1994 and subsequent years.

COMMONLY KNOWN AS: 1603 South 2nd Avenue, Mayword, Illinois 60153

RETURN RECORDED DOCUMENT TO:
Mr. Ronald M. Serpico
Attorney at Law
1807 North Broadway
Melrose Prk, Illinois 60100
TEL: 1-708-343-9600

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UNOFFICIAL COPY MAP SYSTEM

CHANGE OF INFORMATION FORM

		DEAD THE POLLOWING BULES
	iges must be kept in the space limitations shown NOT use punctuation	READ THE FOLLOWING RULES Print in CAPITAL LETTERS with BLACK PEN ONLY Allow only one space between names, numbers and addresses
	SPE	CIAL NOTE:
1995	If you do not have enough room for yo	ith the NAME, leave one space between the name and number our full name, just your last name will be adequate MUST BE INCLUDED ON EVERY FORM
FILED: SEP 2	3 15 - 14 - 15 3 NAME	N: 5-019-5000
		GADDRESS: NAME - APT OF UNIT
		TY ADDRESS: NAME = APT or UNIT 2 N D A V E N U E

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