RELEASE DEEDOF	FFI	CIAL	CC	PY		
ILLINOIS STATUTORY						
MAIL TO:  NLSB GOODINGS GROVE  12747 W. 143RD STREET  LOCKPORT, IL 60441  NAME & ADDRESS OF TAXPAYER:	S	95729397		\$1836 \$ JIT	0540 10/25	\$23.00 /95 15:13:00 -72 <b>9397</b>
		Ŗ	RECORDE	er's stamp		
	<u> </u>					23
· · · · · · · · · · · · · · · · · · ·	ILLIN h is hereby	acknowledged, do	r and in co hereby rer		ose and quit	-claim unto
of the County of COOK State of may have acquired in, through day of FEBRUARY A.D., 19 95, the State of Illinois, as Document No. 95 appurtenances and privileges thereunto belonging of Illinois, as follows to wit:  LOT 15 IN CARRIAGE RIDGE ESTATES UNTIL THE NORTHEAST 1/4 OF SECTION 28, TO PRINCIPAL MERIDIAN, IN COOK COUNTY,	n or by a con and record 5-096060 or apportain NIT 2, B DWNSHIP	ded in the Recor to the hing, situated in	TGAGE  dor's Office c premises the County  IVISION	bearing do of COOK therein describe y of CO IN PART OF T	d, together v	D County, in with all the State of
ATC I in Anaditional space is	roquired f	for legal - attach /2" clear margin			957 ret,	29397
		VOLUME 62 LANE - LEMON	NT, IL 6	0439	<u> </u>	M Valor,
	JULY	19	95	: g# hard different to be used you see to g		
THOMAS W. TURECHAT VICE PRESIDENT	(Seal) _					(Seal)
GLENN S. KELLEY, VICE PRESIDENT	(Seal) _					(Seal)
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For the protection of the owner, this release shall be filed with the County Recorder in whose office the Mortgage or Deed of Trust was filed.

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

COMPLIMENTS OF Chicago Title Insurance Company

INOFFICIAL COPY STATE OF ILLINOIS County of WILL 1, the undersigned, a Notary Public in and for said County, in the State aforesaid, CERTIFY THAT THOMAS W. TURECHEK, VICE PRESIDENT, AND GLENN S. KELLEY, VICE PRESIDENT 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 The Y signed, sealed and delivered the instrument as THEIR free and voluntary act, for the uses and purposes therein set forth. Given under my hand and notarial seal, this 7TH My commission expires on "OFFICIAL SEAL" Dale Ann Kania Notary Public, State of Illinois My Commission Expires 7/30/95 IMPRESS SEAL HERE NAME and ADDRESS OF PREPARER: EXEMPT UNDER PROVISIONS OF PARAGRAPH SECTION 4, NLSB GOODINGS GROVE 12747 W. 143RD STREET DATE: LOCKPORT, IL 60441 Signature of Buyer, Seller on Representative This conveyance must contain the name and address of the Grantee for tax billing purposes: (55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (55 ILCS 5/3-5022) WALTER F. SPERKA AND MAUREEN SPERKA, HUSBAND AND WIFE ILLINOIS STATUTORY LEASE DEE

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