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WARRANTY DEED

ILLINOIS STATUTORY
(Individual to Individual)

95744605

MAIL TO:

CHARLES WOTTRICH
2629 FLOSSMOOR RD
PO Box 399
FLOSSMOOR, IL 60422-0399

DEPT-01 RECORDING \$27.00
T#0012 TRAN 7256 10/31/95 15:20:00
#9032 : CG *-95-744605
COOK COUNTY RECORDER

NAME & ADDRESS OF TAXPAYER:

DAWN K. SMITH
5100 N. Marine Drive
Chicago, Illinois 60640

RECORDER'S STAMP

27.00

THE GRANTOR(S) WALLACE T. FONG, a single man,
of the City of Chicago County of Cook State of Illinois
for and in consideration of TEN and NO/100-----(\$10.00)-----DOLLARS
and other good and valuable considerations in hand paid,
CONVEY(S) AND WARRANT(S) to DAWN K. SMITH

(GRANTEES' ADDRESS) _____
of the City of Lansing County of Cook State of Illinois
all interest in the following described real estate situated in the County of Cook, in the State of Illinois,
to wit:

See attached sheet for legal description of subject property.

95050527
757282772/m/h

NOTE: If additional space is required for legal - attach on separate
8-1/2" x 11 sheet, with a minimum of 1/2" clear margin on all sides.

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

Permanent Index Number(s): 14-08-403-028-1186

Property Address: 5100 N. Marine Drive, Unit 18-E, Chicago, IL 60640

Dated this 19th day of OCTOBER 1995

(Seal) Wallace T. Fong (Seal)
WALLACE T. FONG (Seal) (Seal)

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

COMPLIMENTS OF Chicago Title Insurance Company

BOX 333-CTI

Chicago, IL 60601 No. 1159

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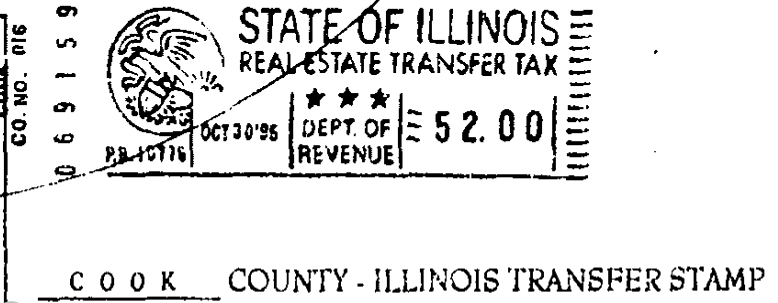
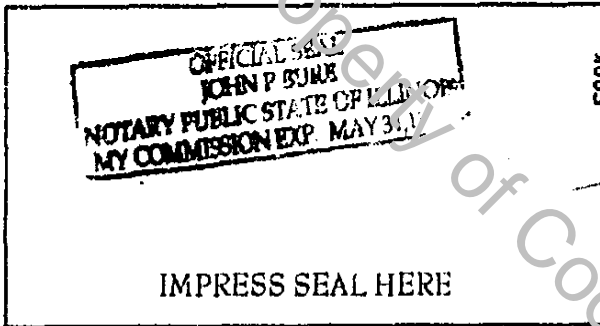
STATE OF ILLINOIS } ss.
County of L A K E }

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, CERTIFY THAT
WALLACE T. FONG

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 _____ has signed, sealed and delivered the 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 notarial seal, this 18th day of October, 1993.

My commission expires on May 31, 1998. John P. Bure, Notary Public



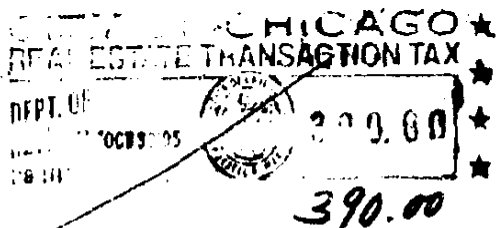
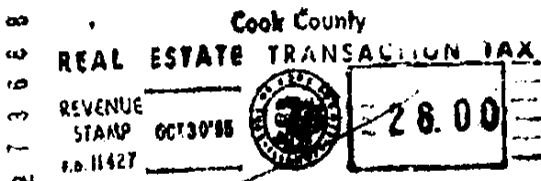
* If Grantor is also Grantee you may want to strike Release & Waiver of Homestead Rights.

NAME and ADDRESS OF PREPARER:
John P. Bure
700 Deerfield Rd., West Suite
Deerfield, Illinois 60015

EXEMPT UNDER PROVISIONS OF PARAGRAPH _____ SECTION 4,
REAL ESTATE TRANSFER ACT
DATE: _____

Signature of Buyer, Seller or 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).



TO

FROM

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ILLINOIS STATUTORY

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UNIT 18"E" IN THE 5100 MARINE DRIVE CONDOMINIUM AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE:
LOTS 15 AND 16 IN WHITE GALT AND PROUDFOOT'S SUBDIVISION OF BLOCK 4 IN ARGYLE IN SECTION 08, TOWNSHIP 40 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN ALSO ACCRETION TO LOT 16 AFORESAID LYING WESTERLY OF THE WEST BOUNDARY LINE OF LINCOLN PARK AS ESTABLISHED BY PLAT RECORDED MARCH 31, 1908 AS DOCUMENT 4179863 PURSUANT TO DECREE ENTERED JULY 18, 1907 IN CASE NUMBER 280120 IN CIRCUIT COURT OF COOK COUNTY, ILLINOIS ALL IN COOK COUNTY, ILLINOIS
WHICH SURVEY IS ATTACHED AS EXHIBIT 'D' TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT 25203727 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, IN COOK COUNTY, ILLINOIS

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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 ADDRESSES for each PIN in our records.

Such changes must be kept within the space limitations shown. Do Not use punctuation. Allow one space between names and initials, numbers and street names, and unit or apt numbers. PLEASE PRINT IN CAPITAL LETTERS WITH BLACK PEN ONLY! This is a SCANNABLE DOCUMENT - DO NOT XEROX THE BLANK FORM. All completed ORIGINAL forms must be returned to your supervisor or Jim Davenport each day.

If a TRUST number is involved, it must be put with the NAME. Leave a space between the name and the trust number. A single last name is adequate if you don't have enough room for the full name. Property index numbers MUST be included on every form.

PIN:

14 - 08 - 403 - 028 - 1186

NAME

DAWN K SMITH

MAILING ADDRESS:

STREET NUMBER STREET NAME = APT or UNIT

5100 N MARINE DR - 18E

CITY

CHICAGO

STATE:

IL

ZIP:

60640 -

PROPERTY ADDRESS:

STREET NUMBER STREET NAME = APT or UNIT

5100 N MARINE DR - 18E

CITY

CHICAGO

STATE:

IL

ZIP:

60640 -

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