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UNOFFICIAL COPY QUIT CLAIM DEED 95844891

Statutory (Illinois)

(individual to Corporation)				
MAIL TO	İ			
PSM Development Corporation 919 North Michigan Avenue Chicago, Illinois 60611				
NAME & ADDRESS OF TAXPAYER			PEFT-01 RECORDING 7\$0012 TRAN 7977 12/05/9 \$6049 \$ CG *-95- COCK COUNTY RECORDER	75 15:42:00
		RECOR	DER'S STAMP	
				·
THE GRANTOR (S)EUNICE_ROSE X	CAI. GORDON	, 30 N. LaSalle	, Chicago, II. 60602	
of theor			State of	ميداسمببي
for and in consideration of ZEN (\$10.00			D()	LLARS
and other good and valuable considerations in h	•			
		CORPORATION		·
not-for-profit accorporation created and existing under and by office at the following address 919 North	virtue of the bichiga:	Laws of the State of n Avenue, Chi	Illinois having its processor, Illinois 6061	rincipal 1
all interest in the following described Real Esta Illinois, to wit	ite singled in t	he County of C	ook , in the State o	f
Lot 18 (except the East 9) for Central Park Addition to Chic North East 1 of Section 14, The Barry Point Road, East of the Illinois.	cago, bei Pownship	ng that part 39 Morth, Ran rincipal Meri	of the West } of th ge 13, lying North dian, in Cook Count	e of
			750 00 KY	9584489
NOTE—If additional space is r bereby releasing and waiving all rights under a				nois
Permanent Index Numberts: 16-14-205	-007-000	0 and 16-14-2	05-008-0000	
Property Address 3449 West Monro	e Street	, Chicago, Il	linois	
DATED the day of	i	October	19.95	
- Coure North	= (3FAL)		((SEAL)
EUNICE ROSE				
	(SFAL)		((SEAL)

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

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STATE OF ILLINOIS

Chicago, Illinois 60602

County of Cook \int 585	
I, the undersigned, a Notary Public in and f	or said County, in the State aforesaid, DO HEREBY CERTIFY
THAT EUNICE ROSE	
personally known to me to be the same	person XX whose name is XXIVX subscribed to the foregoing
instrument, appeared before me this day i	m person, and acknowledged that she signed
	her free and voluntary act, for the uses and purposes
therein set forth, including the release and w	•
Given under my hand and notarial sea	
0,	The the
70	Notary Public
My commission expires on	/
OFFICIAL SEAL BONNIE F FRYER MOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 08/10/98	COUNTY - ILLINOIS TRANSFER STAMPS
IMPRESS SEAL HERE	EXEMPT UNDER PROVISIONS OF PARAGRAPH SECTION 4, REAL ESTATE
NAME AND ADDRESS OF PREPARER:	TRANSFURACT,
Calvert J. Gordon	DATE: 10/25/95
30 North LaSalle, Suite 2024	- C 76191 Ku
TO HOT OIL DEDUTTED DETECT TOTAL	— Street Select or Representative

** This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument. (Chap. 55/1/CS 5/2-5022).

		IO		FROM	QUIT CLAIM DEED Statutory (Illinois) (Individual to Corporation)
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168444836

UNOFFICIAL COPY CHANGE OF INFORMATION FORM

SCANADI E DOCUMENT	DEAD THE FOLLOWING DILLES
SCANABLE DOCUMENT	READ THE FOLLOWING RULES
1. Changes must be kept in the space limitations shown	3. Print in CAPITAL LETTERS with BLACK PEN ONLY
2. DO NOT use punctuation	4. Allow only one space between names, numbers and addresse
SPE(CIAL NOTE:
If a TRUST number is involved, it must be put wit	th the NAME, leave one space between the name and number
	ur full name, just your last name will be adequate
Property index numbers (PIN II) I	MUST BE INCLUDED ON EVERY FORM
PI	N:
16-14-20	5-008-
NAME	
PSM DEVETTO	PMENTCOAP
MAILING	ADDRESS:
STREET NUMBER STREET 1	VAME = APT or UNIT
1 E WACKER	DIR #2030
CITY	DEC 05 1998
CIHICA	60
STATE: ZIP:	
1/ 1/4 60	601-
nn o neine	
	Y ADDRESS:
STREET NUMBER STREET I	NAME = APT or UNIT $R \circ \in S T$
CITY	Ž.
L	
CTATE: 71D:	

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Property of Cook County Clerk's Office

UNOFFICIAL COPY CHANGE OF INFORMATION FORM

	SCANABLE DOCUMENT - READ THE FOLLOWING RULES
1,	Changes must be kept in the space limitations shown 3. Print in CAPITAL LETTERS with BLACK PEN ONLY
2,	DO NOT use punctuation 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
	Froperty index numbers (PIN #) MUST BE INCLUDED ON EVERY FORM
	PIN: 16-14-205-007- NAME PSM DEVELOPMENT COMP
	MAILING ADDRESS:
	STREET NUMBER STREET NAME = APT or UNIT
	IEWALKER DIL #2030
	CITY
	C 1+ 1 C A C 0 DEC 05 1996
	STATE: ZIP:
	1 16 606011-
	PROPERTY ADDRESS:
	STREET NUMBER STREET NAME = APT or UNIT
	$\frac{1}{3}$
	CITY
	CITY C // C // C O STATE: ZIP:
	STATE: ZIP:

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