

UNOFFICIAL COPY

95218702

QUIT CLAIM DEED

THE GRANTOR(S)

ANTOINETTE CHAPMAN, surviving joint tenant, of the City of Palos Heights, State of Illinois for consideration of the sum of TEN DOLLARS and other good and valuable consideration, in hand paid, does by these present Grant, Sell and Convey unto:

ANTOINETTE CHAPMAN, sole Trustee, or her successors in trust, under the ANTOINETTE CHAPMAN LIVING TRUST, dated November 30, 1994, and any amendments thereto.

Grantee's Address: 81 Carriage Trail
Palos Heights, IL 60463

the following described property situated in Cook County, to-wit:

Lot 16 in Block 2 in County Squire Estates Unit Number 1, being a Subdivision of part of the East 1/2 of the Northwest 1/4 of Section 25, Township 37 North, Range 12, East of the Third Principal Meridian, in Cook County, Illinois

Commonly known as: 81 Carriage Trail, Palos Heights, IL 60463

PIN: 23-25-110-016-0000

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

Dated this 15, day of January, 1995

Antoinette Chapman (SEAL)
ANTOINETTE CHAPMAN

DEPT-01 RECORDING 127.50
T00008 TRAN 0270 03/31/95 10:23:00
#1300 \$ DF #--95-218702
COOK COUNTY RECORDER

95218702

27.50
10

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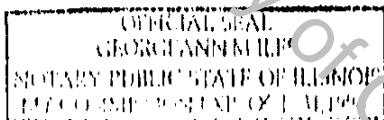
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STATE OF ILLINOIS)
) SS
COUNTY OF COOK)

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that ANTOINETTE CHAPMAN, 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 she signed, sealed and delivered the said instrument as her 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 9th day of JANUARY, 1995.



George Ann Miller
Notary Public

This instrument prepared by: Zapolis & Associates, 15255 S. 94th Ave., Suite 601, Orland Park, IL 60462 - (708) 403-5100

MAIL TO:
ZAPOLIS & ASSOCIATES
15255 S. 94th Ave., Ste. 601
Orland Park, IL 60462

SEND SUBSEQUENT TAX BILLS TO:
Antoinette Chapman
81 Carriage Trail
Palos Heights, IL 60463

EXEMPT UNDER THE PROVISIONS OF PARAGRAPH e, SECTION 7 OF THE REAL ESTATE TRANSFER ACT.

DATE: 2/13/95 AGENT: [Signature]



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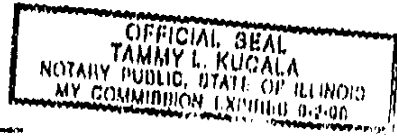
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80774521

UNOFFICIAL COPY STATEMENT BY GRANTOR AND GRANTEE

The grantor or his agent affirms that, to the best of his knowledge, the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire title to real estate under the laws of the State of Illinois.

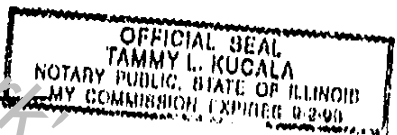
Dated 2/13, 1995 Signature [Signature] Grantor or Agent



Subscribed and sworn to before me by the said Agent this 13th day of Feb, 1995. Notary Public [Signature]

The grantee or his agent affirms and verifies that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire and hold title to real estate under the laws of the State of Illinois.

Dated 2/13, 1995 Signature [Signature] Grantee or Agent



Subscribed and sworn to before me by the said Agent this 13th day of Feb, 1995. Notary Public [Signature]

NOTE: Any person who knowingly submits a false statement concerning the identity of a grantee shall be guilty of a Class C misdemeanor for the first offense and of a Class A misdemeanor for subsequent offenses.

(Attach to deed or ABI to be recorded in Cook County, Illinois, or exempt under the provisions of Section 4 of the Illinois Real Estate Transfer Tax Act.)

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507-2024

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I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent named in Form 1 and that this record was established and filed in my office in accordance with the provisions of the Illinois Statutes relating to the registration of births, stillbirths and deaths.

Date October 9, 1992

Signed *Lolita Maywell*

At Cook County Department of Public Health Official Title Chief Deputy Registrar 1010 Lake Street, Oak Park, Illinois 60301

95218702

REGISTRATION DISTRICT NO. 16.0

STATE OF ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER

REGISTRATION NUMBER

DECEASED NAME

DOB

SEX

RACE

RELIGION

EDUCATION

MARRIAGE

DATE OF DEATH

TIME OF DEATH

PLACE OF DEATH

CAUSE OF DEATH

DATE OF BURIAL

PLACE OF BURIAL

1. DOB 2020 ELLER CHAPMAN

2. SEX M

3. RACE W

4. RELIGION

5. EDUCATION

6. MARRIAGE

7. DATE OF DEATH 10-16-92

8. TIME OF DEATH 1-16-30

9. PLACE OF DEATH

10. CAUSE OF DEATH

11. DATE OF BURIAL

12. PLACE OF BURIAL

13. CITY, TOWN OR VILLAGE

14. COUNTY

15. STATE

16. ZIP CODE

17. MARRIAGE

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19. TIME OF DEATH

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21. CAUSE OF DEATH

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2025-01-20

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