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RECORDED
STATE OF ILLINOIS
CLERK OF COOK COUNTY

Quit Claim Deed

INDIVIDUAL TO INDIVIDUAL

TO

GEORGE E. COLE®
LEGAL FORMS

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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 3-31-95

[Signature] (Grantor or Agent)

"OFFICIAL SEAL"
CATHERINE HOLLOWAY
NOTARY PUBLIC, STATE OF ILLINOIS
MY COM. EXPIRES 01/01/97

Subscribed and sworn to before me this 31st day of March, 1995

[Signature] (Notary Public)

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 title 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 3-31-95

[Signature] (Grantee or Agent)

Subscribed and sworn to before me This 31st day of March, 1995

[Signature] (Notary Public)

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, if Exempt under the provisions of section 4 of the Illinois Real Estate Transfer Tax Act.)

"OFFICIAL SEAL"
CATHERINE HOLLOWAY
NOTARY PUBLIC, STATE OF ILLINOIS
MY COM. EXPIRES 01/01/97

95236365

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MAPPING SYSTEM

Change of Information

60217

Scannable document - read the following rules

- 1. Changes must be kept within the space limitations shown...
- 2. Do Not use punctuations...
- 3. Print in CAPITAL letters with black pen only...
- 4. Do Not Xerox form...
- 5. 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 don't have enough room for your full name, just your last name will be adequate.
- Property index numbers (P#s) must be included on every form...

PIN NUMBER:	1	6	-	0	4	-	3	0	6	-	0	2	3	-	
NAME/TRUST#:	D	e	l	i	b	e	r	c	h	L	J	o	n	e	s
MAILING ADDRESS:	1	1	4	4	N	L	A	T	R	O	B	E			
CITY:	C	H	I	C	A	G	O	STATE:	I	L					
ZIP CODE:	6	0	6	5	1	-									
PROPERTY ADDRESS:	1	1	4	4	N	L	A	T	R	O	B	E			
CITY:	C	H	I	C	A	G	O	STATE:	I	L					
ZIP CODE:	6	0	6	5	1	-									

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COUNTY CLERK'S OFFICE

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