	GEORGE E. COLE® LEGAL FORMS TRUSTEE'S DEED (Woods) (Woods)	
.452r	CAUTION: Consult a lawyer before using or acting under this form. Neither the publisher nor the seller of this form makes any warranty with respect thereto, including any warranty of merchantability or fitness for a particular purpose.	000989
87-85 KS	THIS AGREEMENT, made this 3rd day of April 19.95 between PETER F. GAMBER, MARK J. GAMBER AND MAYNARD F. GAMBER, JR. av trustee under Trust Agreement dated day of 19. and kn. wi as Trust of the QENEYLEYE A. GAMBER 1993 Trust created under the Last Will and Testament of QENEYLEYE A. GAMBER Deceased,	CITY OF EVANSTON Leaf Edge Transfer Tex City Card's Office S 1995 Agent Albert
45008866	Grantor, and LAURA L. 1020M Grantee(s). 1532 Sunset Rittle Road Northbrook, Illinois 60062 One Hundred WITNESSES. The Grantor(s) in consideration of the sum of Sixty Thousand Fire Hundred and no/100 = — dollars receipt whereof is hereby acknowledged, and in pursuance of the power and authority versed in the Grantor(s) as said Trustee(s), and of every other power and authority the Grantor(s) hereunto enabling, do(es) hereby convey an quitelaim unto the Grantee(s), in fee simple, the following described real estate, situated in the County of Cook State of Illinoity to Wit:	PAD APR 0
Lots North Third lum rand l Illin cents all	Above Space to the Collowing t	o Declaration of Condom ant dated April 2, 1969 Deeds of Cook County, with its undivided per- ty and space comprising
Subje	pect to general real estate taxes for 199h and subsequent years and mat together with the tenements, hereditaments and appurtenances thereunto belonging or in any wise a Permanent Real Estate Index Number(s): 05-3h-32h-017-1023	opertaining.
	Address(es) of real estate: 2333 Central Street, Unit #40%, Evanutor, Illinois IN WITNESS WHEREOF, the grantor is a strustee as aforesaid, Trust hereups see	
	scall a the day and year first above written.	SEAL)
3	PLEASE PRINT OR TYPE NAME(S) BELOW SIGNATURE(S) Mark I Cambri as trustee as a	foresaid (SEAL)
•	in the State aforesaid, DO HEREBY CERTIFY that CO Trustees PETER F. GAMBER, MARK F. GAMBER, JR. AU TRUCTEE AS AFORESAID	blic in and for said County, 📜
NOTA	personally known to me to be the same person a whose name OFFICIANAPRESSAL" subscribed to the foregoing instrument, appeared before me this day in p E.W. PILASPONIC ARY PUBLIC, STATE OF ILLINOIS TOMMISSION EXPIRES 11/24/97 rrustee 18, for the uses and purposes therein ser forth.	person, and acknowleged that

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GEORGE E. COLE®	Ю	As Trustee	. TRUSTEE'S DEED
# # # # # # # # # # # # # # # # # # #			

	2130
Given under my hand and official seal, this	day of Hereb 19 95
Commission expires November 2h, 19 97	10 Tuansi
	NOTARY PUBLIC E.W. PILANSKI
This instrument was prepared by E. W. PILAWSKI, 3810	Medford Circle Vertbbrook, Il. 00002
	(Name and Address)
DAVID BOONE, ESQ.	SEND SUBSEQUENT TAX BILLS TO:
(Name)	I I Iouanu
MAIL TO: 555 Skokle Blvd. Suite 500	L. Larson (Name)
(Address)	- }
	2333 Central Street. Unit #405
Northbrook, Illinois 60062	(Address)
(City, State and Zip)	
	Evanston, Illinois (020)
OR RECORDER'S OFFICE BOX NO.	(City, State and Zip)
DOV ኅባባ (\T !
DUA 333-1	. 1 4



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CHANGE OF INFORMATION FORM

INFORMATION TO BE CHANGED

Use this form for name/address desired on real property fax 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 apervisor or Jim Davenport each day.

If a TRUST number is in wived, 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 incl on every form.	uded
PIN: 0 5 - 3 4 3 2 4 - 0 4 7 - 1 0 2 3 NAME: LA U RA L EE TARSON MAILING ADDRESS: STRECT NUMBER STREET NAME = APT or UNIT 2 3 3 C E N T R A L 5 T 1 4 1 0 5 CITY	95251715
을 PROPERTY ADDRESS:	•
PROPERTY ADDRESS: STREET NUMBER STREET NAME = APT or UNIT 2 3 3 3 0 8 N T R A L S T. # 4 0 2	
CITY E V A N S T O N	
STATE: ZIP: [1 L] [0 0 2 0 1 - [5 7 0 1]	

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