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GEORGE E. COLE
LEGAL FORMS

No. 810
November 1994

95386224

WARRANTY DEED
Joint Tenancy
Statutory (ILLINOIS)
(Individual to Individual)

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.

DEPT-01 RECORDING \$27.50
T40000 TRAN 1856 06/14/95 15:15:00
#3353 C.J * -95-386224
COOK COUNTY RECORDER

THE GRANTOR(S) EMILIO ARAGONES, A Bachelor and
CARMEN M. ROBLES, A Spinster

of the City of Chicago County of Cook
State of Illinois for and in consideration of
Ten (\$10.00) and no/100----- DOLLARS,
and other good and valuable considerations

_____ in hand paid,

CONVEY(S) _____ and WARRANT(S) _____ to
NASALLE NATIONAL TRUSTEE/A 118418,
dated November 8, 1993

(Names and Address of Grantees
not in Tenancy in Common, but in JOINT TENANCY, the following
described Real Estate situated in the County of Cook
in the State of Illinois, to wit:

Above Space for Recorder's Use Only

LOT 8 IN CARTER'S RESUBDIVISION OF BLOCK 8 IN CARTER'S RESUBDIVISION
OF BLOCKS 1, 2, 3, 4 AND 7 IN CLIFFORD'S ADDITION TO CHICAGO, IN
SECTION 1, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL
MERIDIAN, IN COOK COUNTY, ILLINOIS.

47596 2/10/95

GIT

95386224

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois. TO HAVE AND TO HOLD said premises not in tenancy in common, but in joint tenancy forever.

Permanent Real Estate Index Number(s): 16-01-308-005, Vol. 535

Address(es) of Real Estate: 1049 N. Mozart, Chicago, IL. 60622

DATED this: 30th day of May 19 95

EMILIO ARAGONES (SEAL) CARMEN M. ROBLES (SEAL)

(SEAL) (SEAL)

Emilio Aragonés
Bayamon

State of Illinois County of Bayamon ss. I, the undersigned, a Notary Public in and for
said County, in the State aforesaid, DO HEREBY CERTIFY that Emilio Aragonés,
A Bachelor

personally known to me to be the same person whose name subscribed
to the foregoing instrument, appeared before me this day in person, and acknowledged that
he signed, sealed and delivered the said instrument as
free and voluntary act, for the uses and purposes therein set forth, including the release and
waiver of the right of homestead.



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GEORGE E. COLE®
LEGAL FORMS

Warranty Deed
JOINT TENANCY
INDIVIDUAL TO INDIVIDUAL

TO

Property of Cook County Clerk's Office

Cook County
REAL ESTATE TRANSFER TAX
RECEIVED
MAY 19 1995

STATE OF ILLINOIS
NOTARY PUBLIC

Affidavit 9878

Given under my hand and official seal, this 30 day of May 19 95

Commission expires Does not expires 19

[Signature]
NOTARY PUBLIC

This instrument was prepared by Arnold Rivera, Esq., 3106 N. Cicero, Chicago, IL, 60641
(Name and Address)

Patrick Driscoll, Attorney
(Name)

77 West Washington, #800
(Address)

Chicago, IL, 60602
(City, State and Zip)

SEND SUBSEQUENT TAX BILLS TO:

NORWEGIAN AMERICAN HOSPITAL
(Name)

1044 N. FRANCISCO AVE
(Address)

CHICAGO IL 60602
(City, State and Zip)

RECORDER'S OFFICE BOX NO.



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STATE of ILLINOIS

COUNTY of COOK

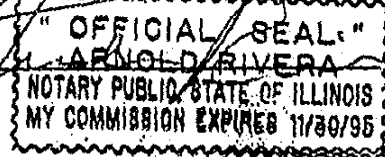
I, the undersigned, a Notary Public in and for said county and state, do hereby certify that

CARMEN M. ROBLES, a *spinster*

personally known to me to be the same person(s) whose name(s) in(are) subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he, she, they signed and delivered the said instrument as his, her, their free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and official seal, this 8TH day of JUNE, 1995.

My commission expires:



Property of Cook County Clerk's Office

95056221

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122295006

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CHANGE OF INFORMATION FORM

SCANABLE DOCUMENT - READ THE FOLLOWING RULES

- 1. Changes must be kept in the space limitations shown
- 2. DO NOT use punctuation
- 3. Print in CAPITAL LETTERS with BLACK PEN ONLY
- 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
 Property Index numbers (PIN #) MUST BE INCLUDED ON EVERY FORM

PIN:

16 - 01 308 - 005 - 0000

NAME

NORWEGIAN AMERICAN HOSP.

MAILING ADDRESS:

STREET NUMBER STREET NAME = APT or UNIT

1044 N FRANCISCO AVE

CITY

CHICAGO

STATE:

IL

ZIP:

60622

PROPERTY ADDRESS:

STREET NUMBER STREET NAME = APT or UNIT

1049 N MOZART ST

CITY

CHICAGO

STATE:

IL

ZIP:

60622

60622-1049

JUN 14 1995
 COOK COUNTY TREASURER

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