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COOK COUNTY RECORDER

FOR RECORDER'S OFFICE USE ONLY

DESCRIPTION OF ATTACHED INSTRUMENT:

Release of ALL Claims

PREPARER:

Francisco J Nava 2115 W. 49th Place
Chicago, IL 60609

DATE OF INSTRUMENT:

Feb 26 1996

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#GJ7103

RELEASE OF ALL CLAIMS

THIS INDENTURE WITNESSETH that in consideration of the sum of \$1,689.99, receipt whereof is hereby acknowledged, I (we) do hereby for my (our) heirs, personal representatives and assigns, release and forever discharge FRANCISCO JAVIER NAVA and any other person, firm or corporation charged or chargeable with responsibility or liability and their heirs, representatives or assigns, from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action arising from any act or occurrence up to the present time, and particularly on account of all personal injury, disability, property damage, loss or damages of any kind sustained or that I (we) may hereafter sustain in consequence of an accident that occurred on or about the 22ND day of JANUARY, 1994, at or near Chicago, Illinois.

To procure payment of the said sum I (we) hereby declare: that I am (we are) more than legal years of age; that no representations about the nature and extent of said injuries, disabilities or damages made by any physician, attorney or agent of any party hereby released, nor any representations regarding the nature and extent of legal liability of financial responsibility of any of the parties released, have induced me (us) to make this settlement; that in determining said sum, there has been taken into consideration not only the ascertained injuries, disabilities and damages, but also the possibility that the injuries sustained may be permanent and progressive and recovery therefrom uncertain and indefinite, so that consequences not now anticipated may result from the said accident.

The undersigned agree(s) as a further consideration and inducement for this compromise settlement, that it shall apply to all unknown and unanticipated injuries and damages resulting from said accident, casualty or event, as well as to those now disclosed.

I (we) understand that the parties hereby released admit no liability or any sort by reason of said accident and that said payment and settlement in compromise is made to terminate further controversy respecting all claims for damages that I (we) have heretofore asserted or that I (we) or my (our) person representatives might hereafter assert because of said accident.

Signed and sealed this 26 day of Feb, 1996

STATE FARM INSURANCE COMPANY AS SUBROGEE OF

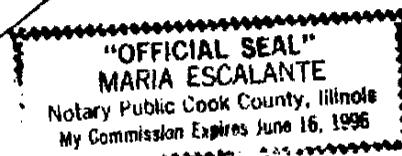
ALLEN A. RODRIGUEZ

By: Francisco J. Nava
SIMON, McCLOSKEY AND SCOVILLE, LTD.
Attorneys and Duly Authorized Agent

Subscribed and sworn to before me

this 26 day of Feb, 1996
at Chicago, County of Cook, State of Illinois

Notary Public Maria Escalante



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