

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

96218540

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.

THE GRANTOR(S) Juan R. Torron and Carmen Torron,
Married To Each Other

of the City of Chicago County of Cook

State of Illinois for and in consideration of
(\$10.00) Ten _____ DOLLARS,

and other good and valuable considerations do
_____ in hand paid,

CONVEY(S) _____ and WARRANT(S) _____ to

Guillermo Doble and Gladys Doble

1727 North Kedzie
Chicago, Ill 60639

(Names and Address of Grantee)

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:

LOT 9 IN BLOCK 4 IN DELAMATER'S SUBDIVISION OF THE
WEST 1/2 OF THE SOUTHEAST 1/4 OF THE NORTHEAST 1/4
OF SECTION 34, TOWNSHIP 40 NORTH, RANGE 13 EAST OF
THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Above Space for Recorder's Use Only

25/96

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Law 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): 13-34-230-009-0000

Address(es) of Real Estate: 2039 North Kedzie, Chicago, Illinois

DATED this: 12th day of March 19 96

Please
print or
type name(s)
below
signature(s)

Juan R. Torron (SEAL)
Juan R. Torron

Carmen Torron (SEAL)
Carmen Torron

(SEAL)

(SEAL)

State of Illinois, County of Cook

ss. I, the undersigned, a Notary Public in and for
said County, in the State aforesaid, DO HEREBY CERTIFY that Juan R. Torron
and Carmen Torron, Married To Each Other

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

COPIED SEAL
ILLINOIS
NOTARY PUBLIC OFFICE OF ALONZO
MY COMMISSION EXPIRES 11/27/97

BOX 333-CTI

1016551096 / JH 456 Sc
10789547 J / 960153391004

96218540

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Warranty Deed
JOINT TENANCY
INDIVIDUAL TO INDIVIDUAL

TO

GEORGE E. COLE
LEGAL FORMS

0158872



STATE OF ILLINOIS
REAL ESTATE TRANSFER TAX
DEPT. OF REVENUE
\$ 5.00

Cook County 42.50

REAL ESTATE TRANSFER TAX
\$ 42.50

CHGO.

637.50

05582206

Given under my hand and official seal, this 18th day of March 19 96
My commission expires 12/5 19 97
E Marshall
NOTARY PUBLIC

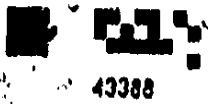
This instrument was prepared by E. Marshall, 7026 W. North Ave., Suite 207, Chicago, IL 60635
(Name and Address)

MAIL TO: RENE COLLIS
(Name)
P.O. BOX 7315
(Address)
WESTCHESTER, IL 60154
(City, State and Zip)

SEND SUBSEQUENT TAX BILLS TO:
Guillermo Doble and Gladys Doble
(Name)
2039 North Kedvale
(Address)
Chicago, IL 60639
(City, State and Zip)

OR RECORDER'S OFFICE BOX NO. _____

Property of Cook County Clerk's Office



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CHANGE OF INFORMATION FORM

INFORMATION TO BE CHANGED

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

If a TRUST number is involved, 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 included on every form.

PIN:

13 - 34 - 230 - 009 - 0000

MAR 21 1996

NAME

G U I L L E R M O D O B L E

MAILING ADDRESS:

STREET NUMBER STREET NAME - APT or UNIT

2039 N KEDVALE

CITY

C H I C A G O

STATE:

IL

ZIP:

60639

PROPERTY ADDRESS:

STREET NUMBER STREET NAME - APT or UNIT

2039 N KEDVALE

CITY

C H I C A G O

STATE:

IL

ZIP:

60639

96218540

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