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DEPT-01 RECORDING 927.50
 T40009 TRAN 1468 03/25/96 09:56:00
 65390 + RH *-96-223599
 COOK COUNTY RECORDER

TRUSTEE'S DEED

THIS INDENTURE WITNESSETH, that the Grantor, THE KANSAS STATE BANK a Banking Association, of Kansas, Illinois, a corporation duly organized and qualified to act as Trustee under the laws of the State of Illinois, as Trustee under the provisions of a Trust Agreement dated February 16, 1991, known as Trust No. 202, FOR AND IN CONSIDERATION of TEN DOLLARS (\$10.00) and other good and valuable consideration in hand paid, GRANTS and CONVEYS to EDMUND RIMMELE AND ROSINA RIMMELE of the County of Cook, and State of Illinois, the following described real estate, to-wit:

2737D

LOT 3 IN OWNERS SUBDIVISION OF PART OF BLOCK 14 IN EAST HINSDALE, A SUBDIVISION OF THE EAST HALF AND THAT PART OF THE EAST HALF OF THE SOUTHWEST QUARTER LYING NORTH OF CHICAGO, BURLINGTON AND QUINCY RAILROAD IN SECTION 6, TOWNSHIP 38 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, STATE OF ILLINOIS.

PSU # 18-06-305-011 Addr-1415 Walnut St Western Springs, IL

THIS DEED is made, executed and delivered in pursuance of a resolution adopted at a meeting of the Board of Directors of the Kansas State Bank, Kansas, Illinois, held on the 14th day of March, 1995.

(330751) 83-12470 1/2
 TITLE SERVICES

IN WITNESS WHEREOF, the said Grantor has caused its corporate name as said Trustee to be hereunto subscribed by its Executive Vice-President and its duly attested corporate seal to be hereunto affixed by its Cashier, all in the Village of Kansas and State of Illinois.

DATED this fourth day of March, 1996.

KANSAS STATE BANK, KANSAS, ILLINOIS
 TRUSTEE UNDER TRUST NO. 202

BY: Michael Kern
 Executive Vice-President

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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:

18 - 06 - 305 - 011 - [] [] []

NAME

EDMUND & ROSINARIMMELE

MAILING ADDRESS:

STREET NUMBER STREET NAME = APT or UNIT

1415 WALNUT ST [] [] [] [] [] [] [] []

CITY

WESTERN SPGS

STATE:

IL

ZIP:

60558 - [] [] []

PROPERTY ADDRESS:

STREET NUMBER STREET NAME = APT or UNIT

1415 WALNUT ST [] [] [] [] [] [] [] []

CITY

WESTERN SPGS

STATE:

IL

ZIP:

60558 - [] [] []

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