SPECIAL

## WARRANTY DEPNOFFICIAL COPY Statutory (Illinois) (Corporation to Individual) 97417258

MAREO RAYMOND CARRIALES	<u> </u>	RECORDING \$27.50
41 WEST 21ST STREET		TRAN 7596 06/11/97 13:52:00 ・KP モータアーチ17258
CHICAGO HEIGHTS, IL 60411		COUNTY RECORDER
NAME & ADDRESS OF TAXPAYER: RAYMOND CABRIALES		
41 WEST 21ST STREET		
CHICAGO HEIGHTS, IL 60411	RECORDER'S STA	MP
THE GRANTOR FORD CONSUMER FINA	INCE COMPANY, INC.	
a corporation created and existing under and be to transact business in the State of Illinois for and other good and valuable considerations in Directors  CONVEYS to: 2270000	r and in consideration of TEN and no/100	by the Board of
	st Street, Chicago Heights, IL	STARTE OF STARTS
<del></del>	CI AS JOINT TENANTS OR TENANTS IN	COMMON.
Gramee's Address	City Sta	ate Zip
	in Chicago Heights, being a sub North, Range 14 Det of the Thir is	
松口证光准		
And the party of the first part, for itse party of the second part, their heirs & ass the said premises thereby granted are recited; and that the said premises, again or under it, it WILL WARRANT AND FOREVER DE	signs, that it has not done or suffered to to , or may be, in any magner incumbered or to set all persons lawfully claiming, or to cla	a done, anything whereby hangot, except as herein
NOTE: If additional space is Permanent Real Estate Index Number(s)	required for legal - attach on separate 8-1/2 x 1 32-29-208-019 and 020	1 shoet.
Property Address: 41 21st Str	met, Chicago Heights, Illinois	<del></del>
In Witness Whereof, said Grantor has caused signed to these presents by its	l its corporate sent to be hereto affixed, and in President, and attested by its	has caused its name to be Secretary, this
Name of Corp		
IMPRESS By	ONigget	(SEAL)
CORPORATE Vice SEAL HERE ATTEST Asst	President OCL	(SEAL)

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

\$27.50

STATE OF TEXAS COUNTY OF BALLAS

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	ned, a Notary Public in			_		BY CERTIFY THAT,
Tice The state of	President of the URD OF	NSUMER FLANCE	CONTROL PISO	und D. I	. Lowier	markamatiki kuminis sa
me so be me_	Secretary of	savi corporatio	n, and personal	lly known to	me to be the	same persons whose
	cribed to the foregoing  Vice President a		_		-	everally acknowledged and the said instrument
· ·	corporate scal of said C					
						voluntary act and deed
of said corporati	ion, for the uses and pur					, , , , , , , , , , , , , , , , , , , ,
. Given u	inder my hand and notai	rial scal, this	<b>27</b> day o	1 May	. 1991	l.
•				Ain	and Ver	sen
.~ My commissie	on expires on 24	13	.1949_		- Calendary - Andrews	Notary Public
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<b>,</b>		2/2-				
	- Link 30	on Ox				
	Motory Public, South	i di letas	OT O	04060 Z	0000	soo cis
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IM	IPRESS SEAL HERE		EALTHA			F PARAGRAPH REAL ESTATE
NAME AND	DADDRESS OF PRE	PARER:	TRANSFEI		arc riora a'	REAL ESTATE
KERNETH I	4		DATE:	<sup>4</sup> D <sub>x</sub>		
ATTORREY		<del></del>				
4239-W. (	i3rd-Etreet		Buyer, Selle	er or Repres	senlative	
Chicago,	IL 60629				0.	
44 TM *						
inis convey:	ance must contain the	: name and add	dress of the Gr	antee for ta	x billing, per	poses: (Chap, 55
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2652	·	•			_	
TO REORDER PLEASE CALL D AMERICA TITLE COMPA (708) 249-4041		<u>- '                                   </u>				SECUAL ARRANTY DEE Statutory (Illinois) Corporation to Individual
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TO REORDER PLEASE CALL MID AMERICA TITLE COMPANY (708) 249-4041		•	•			DEED ois) dividual)
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#### MAP SYSTEM

## CHANGE OF INFORMATION FORM

SCANABLE DOCUMENT - 1	READ THE FOLLOWING RULES
Changes must be kept in the space limitations shown:     DO NOT use punctuation	3. Print in CAPITAL LETTERS with BLACK FEN ONE, y 4. Allow only one space between names, numbers and additional states.
. SPEC	CIAL NOTE:
West do not have enough room for you	the NAME, leave one space between the name and number in full name, just your last name will be adequate  TUST HE INCLUDED ON EVERY FURM
PII 32-29-20 NAME	<del></del>
RAYMOND	BRIALES
	STISTLEET
CITY  CHICA  STATE: ZIP:	CO HETCO AND THE TOTAL OF THE T
PROPER' STREET NUMBER STILET  4 1 2 1 ST S  CITY  CHIC	AGO HETG
106	0411-

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Probery of County Clerk's Office

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MAP SYSTEM

### CHANGE OF INFORMATION FORM

	SCANABLE DOCUMENT - READ THE FOLLOWING RULES					
1.	Changes must be kept in the space limitations shown:  1. Print in CAPITAL LETTERS with BLACK PEN ONLY	). Print in CAPITAL LETTERS with BLACK PEN ONLY				
1	DO NOT use punctuation 4. Allow only one space between names, numbers and address	5:				
	. SPECIAL NOTE:	_				
	If a TRUS I number is involved, it must be put with the NAME, leave one space between the name and number					
	is for do not have enough room for your full name, just your last name will be adequate					
	Property Index numbers (PIN II) MUST BE INCLUDED ON EVERY FORM					
_	Ox PIN:					
	PIN:   3 2 - 24 - 208 - 020 - 0000   3 -					
	NAME					
	RAYMOND CABRIALES					
	MAILING ADDRESS:					
	STREET NUMBER STREET NAME = APT or UNIT					
	111 111 FISH 1211 STI. BITILE ET					
	CITY					
	CHICAGO HETO &					
	STATE: ZIP:					
•	DROPERTY ADDRESS:					
PROPERTY ADDRESS:						
4	STREET NUMBER STILET NAME = APT OF UNIT					
	41. 21ST STREET					
	CITY					
	CHICAGO HETG					
	STATE: ZIP:					
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