

UNOFFICIAL COPY

T.O.# 1001150

WARRANTY DEED

ILLINOIS STATUTORY

97591050

MAIL TO:

BENEDICT N. CHARLEY
16406 WABASH
SOUTH HOLLAND, IL 60473
BOX 251

DEPT-01 RECORDING \$25.00
T#0012 TRAM 6307 08/13/97 11:58:00
4065 CG \*-97-591050
COOK COUNTY RECORDER

RECORDER'S STAMP

NAME & ADDRESS OF TAXPAYER:

Benedict N. Charley
16406 Wabash
South Holland, IL 60473

THE GRANTOR(S) MICHAEL P. WALSH AND LAURA A. WALSH, HIS WIFE
of the Village of South Holland County of Cook State of Illinois
for and in consideration of TEN and 00/100 (\$10.00) DOLLARS
and other good and valuable considerations in hand paid,
CONVEY(S) AND WARRANT(S) to Benedict N. Charley

(GRANTEE(S) ADDRESS) 500 W. 144th Street, Apt. 2
of the Village of Riverdale County of Cook State of Illinois
the following described real estate situated in the County of Cook, in the State of Illinois, to wit:

LOT 107 IN THE FIRST ADDITION TO LAMPLIGHTER BEING A SUBDIVISION OF PART OF THE SOUTH WEST 1/4 OF THE NORTH WEST 1/4 AND PART OF THE NORTH WEST 1/4 OF THE SOUTH WEST 1/4 ALL IN SECTION 22, TOWNSHIP 36 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, COOK COUNTY, ILLINOIS.

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 forever.

Permanent Index Number(s): 29-22-112-002-0000
Property Address: 16406 S. Wabash Avenue, South Holland, Illinois 60473

Dated this 11TH day of August 19 97.

Signatures of Michael P. Walsh and Laura A. Walsh with seals.

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

COMPLIMENTS OF Chicago Title Insurance Company

Handwritten initials and number 250.

Vertical stamp number 97591050.

# UNOFFICIAL COPY

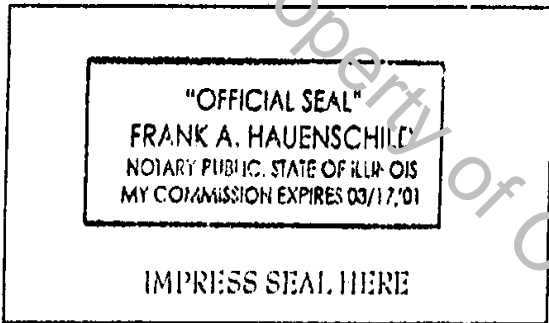
STATE OF ILLINOIS ) ss.  
County of Cook )

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, CERTIFY THAT MICHAEL P. WALSH AND LAURA A. WALSH, HIS WIFE personally known to me to be the same person S whose name S subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the 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.

Given under my hand and notarial seal, this 11TH day of August, 19 97.

*Frank A. Hauenschild*

My commission expires on March 17, 19 2001 Notary Public



Cook COUNTY - ILLINOIS TRANSFER STAMP

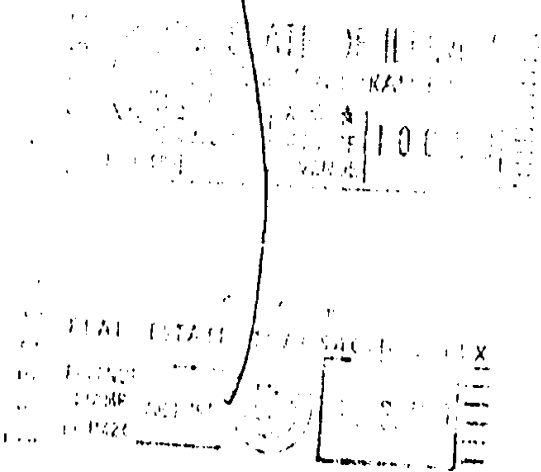
\* If Grantor is also Grantee you may want to strike Release & Waiver of Homestead Rights.

NAME and ADDRESS OF PREPARER:

Frank A. Hauenschild  
17050 South Park Avenue  
South Holland, IL 60473

This conveyance must contain the name and address of the Grantee for tax billing purposes: (55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (55 ILCS 5/3-5022).

97591050



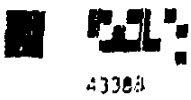
BENEDICT N. CHARLLEY

TO

MICHAEL P. WALSH  
and LAURA A. WALSH

FROM

WARRANTY DEED  
FOR THE STATE OF ILLINOIS



4338A

# 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 letter name is adequate if you don't have enough room for the full name. Property index numbers MUST be included on every form.

### PIN:

2 9 - 2 2 - 1 1 2 - 0 0 2 - 0 0 0 0

### NAME

B E N E D I C T N C H A R L E Y

### MAILING ADDRESS:

STREET NUMBER STREET NAME - APT or UNIT

1 6 4 0 6 W A B A S H

### CITY

S O H O L L A N D

### STATE:

I L

### ZIP:

6 0 4 7 3 -

### PROPERTY ADDRESS:

STREET NUMBER STREET NAME - APT or UNIT

1 6 4 0 6 W A B A S H

### CITY

S O H O L L A N D

### STATE:

I L

### ZIP:

6 0 4 7 3 -

0501050