| RELEASE DEED OFFIC ILLINOIS STATUTORY   | IAL COPYS  |
|---|--|
| MAIL TO: Keldert C. Brown Jr. 18642 S. Keelert OC Hills, IT! 60478  NAME & ADDRESS OF TAXPAYER: | # # # # # # # # # # # # # # # # # # #  |
| NAME & ADDRESS OF TAXPAYER:   |  |
| Kobert L. Brown, dr. and  |  |
| Catherine Brown 1842 S. Keeler Avenue   | Ş  |
| 1047 3. REFIEL AVEINE   | RECORDER'S STAMP   |
| Country Club Hill Hillingis 97052908  | CECORDIA 3 STAME   |
| Know All harn by These Presents, That Atlanta Life successor to Chicago Metro                   | ropolitan Mutual Assurance Co.   |
| of the County of Fulton State of Georgia  | for and in consideration of one dollar, and for other  |
| good and valuable or sideration, the receipt of which is  | hereby acknowledged, do hereby remise, convey, release   |
| and quit-claim unto Robert and Catheri  | ne Brown   |
| 18642 South Keeler Avenue, Con  |  |
| of the County of rook Sinte of Illinois   | all right, title, interest, claim or demand whatsoever   |
| once have acquired in   | through or by a certain Trust Desar  |
| bearing date the <u>48th</u> day of <u>June</u> County, in the State of Planois, as Do          | A.D., 1978, and recorded in the Recorder's Office of cument No. 24513445 to the premises therein |
| described, together with all the appurtenances and privil                                       | eges thereunto belonging or appertaining, situated in the  |
| County of Cook State of Illinois, a. follo  | ws to wit:<br>ourse's Sixth addition to south Englewood  |
| being a subdivision of the north west quarte  | or 1/4 and the west half 1/2 of the south  |
| west quarter 1/4 and thne west half 1/2 of  | he south west quarter 1/4 of the south   |
| west quarter 1/4 of the south west quarter of   |  |
| 14, east of the third pricipal meridian, in   | Cook County, Illinois.   |
| NOTE: If additional space is required   | for legal at ach on separate 8-1/2" x 11 sheet,  |
| with a minimum of I   | /2" clear margin on all sides.   |
| Permanent Index Number(s): 66-35-647-00-0000  |  |
|   |  |
| Property Address:<br>18642 South Keeler Avenue, Country Clu                                     | ub Hill, Illinois 604.8  |
| Dated this 3rd day of July  | _19 <u>96</u>  |
| Self Leve (Seal)  | (Seal)   |
| Geoffrey Nnadi, Interim Treasurer   | Howard S. Pringle, VP Admir . S.rvices   |
| (Seal)  | (Seal)   |

For the protection of the owner, this release shall be filed with the County Recorder in whose office the mortgage or Deed of Trust was filed.

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES COOK COUNT RECORDER JESSE WHITE MARKHAM OFFICE

## **UNOFFICIAL COPY**

Property of Cook County Clark's Office

| Geoffrey Nnadi and Howard S. Pring? sonally known to me to be the same person S  | _ whose nam                    |                                   | subscri                          |
|--|--------------------------------|-----------------------------------|----------------------------------|
| the foregoing instrument, appeared before me this da<br>signed, sealed and delivered th<br>for the uses and purposes therein set forth | y in person, a<br>e instrument | and acknowledged that<br>as their | t hey<br>free and voluntar       |
| Given under my hand and notarial seal, this  | 3rd                            | day of _July                      | . 19 <u>96</u>                   |
|  | <u>ر</u>                       | Mary                              | Welsh                            |
| - Co   |                                | Nefar                             | Notary Public, Fulton County, G. |
|  |                                | My Ca                             | mmission Expires Feb. 13,        |
| O Chr.   |                                | ·, ·                              | . Luca 199 19 <sup>3</sup>       |

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IMPRESS SEAL HERE

NAME and ADDRESS OF PREPARER: The Atlanta Life Insurance Co. 100 Auburn Avenue Atlanta, Georgia 30601

EXEMPT UNDER PROVISIONS OF PARAGRAPH SECTION 4, REAL ESTATE TRANSFER Signature of Buyer, Seller or Representative

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

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