WARRANTY DEFIN O Statutory (Illinois)	FFICIAL CO	PY
MAIL TO: Wayne Shapiro 29 S. LaSalle St., Suite 4 Chicago. II. 1803 NAME & ADDRESS OF AXPAYER Desiree E. Garci 6347 S. Kildry Chicago, Il indis 2529	97099247	DEST-01 FELURDING 749010 TRAN 7261 02/11 97 12: 45540 1 CLJ *-97-099 Chok County Recorded R'S STAMP
of the City of Chicago		State of Illinois
for and in consideration of and other good and valuable considerations in	.00) & No/100	DOLLARS
CONVEY AND WARRANT to PEST	REE E. GARCIA	
(GRANTEE'S ADDRESS) 2209 West	<u> </u>	
	County of	, in the State of THE NORTH WEST ANGE 13, EAST
•	SUITE ETA	AL PLAZA 97093247
	CHICAGO, IL 60	502
Permanent Index Number(s)	required for legal - attach on separate 8- nd by virtue of the Homestead Exemption 020	1·2 x 11 sheet
Permanent Index Number(s) Property Address: 6347 S. Kildare,	required for legal - attach on separate 8- nd by virtue of the Homestead Exempti-	1-2 x 11 sheet. on Laws of the State of Illinois.
Permanent Index Number(s) Permanent Address: 6347 S. Kildare,	required for legal - attach on separate 8- nd by virtue of the Homestead Exemption 020 Chicago, IL 60629	1·2 x 11 sheet

NOTE: PLEASE TYPE OR PRINT NAME DELOW ALL SIGNATURES

UNOFFICIAL COPY

STATE OF ILLINOIS County of Cook

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L, the undersigned, a Notary Public in and for said County.	in the State aforesaid. DO HE	REBY CERTIFY
THAT ROBERT TITO and TERESA H. TITO, his wife.		
personally known to me to be the same person(s) who		to the foregoing
insturment, appeared before me this day in person, and a	· - ·	signed.
sealed and delivered the said instrument as their fi	ree and voluntary act, for the u	ises and purposes
therein set forth, including the release and waiver of the righ	y of homestead.	_
Given under my hand and notarial seal, this 27th	day of November	. 19 _9 6) .
	of the same	a La
	KAN JOSE	Notary Public
My commission expires on		. votary rabile
	CITY OF CH	ICAGO*
O	REAL ESTATE TRANS	SACTION TAX
Januarian Januarian	GEPT. OF	8 8 5 8 8
OFFICIAL SEAL"	, FB 11195	·
NOTARY PUBLIC, STATE OF ILLINOIS	COUNTY - ILLINOIS TRANS	TED CTAMBS
WII COMMINISTRATION FOR MEDICAL MEDICA	COUNTY FILLINGIS TRANS	n LR SIAMIS
IMPRESS SEAL HER!. EN SE	PEUNDER PROVISIONS OF	
NAME AND ADDRESS OF PREPARER TRANS	SECTION 4, REFER ACT	EAL ESTATE
DVIF		
John E. Dvorak		
•	Seller or Representative	
Westchaster, IL 60154-7038	4	
** This conveyance must contain the name and address of the ILCS 5/3-5020) and name and address of the person preparing		
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