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GEORGE E. COLES LEGAL FORMS

No. 808 November 1994

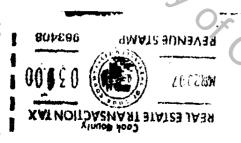
| 47468 Statutory (Illinois) (individual to Individual) | | | |
|---|---|--|-----------------|
| CAUTION: Consult a lawyer before using or acting under this form. Neither the publisher nor the seller of this form makes any warranty with respect thereto, including any warranty of merchantability or fitness for a particular purpose. | 03/27/97 | 0011 HC# | 11:16 |
| | | RECODIN 4 97210827 # | 25.00 |
| THE GRANTOR David C. Hammond, married to Sharon S. Hammond *** | 03/27/97 | 0011 MCH | 11116 |
| of the City of Chicago Htebunty of Cook | | | |
| State of Illinois for and in consideration of | | | |
| **TEN AND NO/100 | | | |
| DOLLARS, | | | |
| and other good and valuable considerations \$10.00 | | | |
| in hand paid, | | | |
| CONVEY 5 and WARRANT 5 to | nau censiv | | |
| Patrick O. Hammond, a single man | OOK COUNTY REPOSIBLER | | |
| (Name and Address of Grantee) | | | |
| the following described Real Estate situated in the Cotary of | SALACITE | | |
| | An About Space for Reco | order's Use Only | |
| a Subdivision of part of the East 1/2 or the West 1/2 of the Southeast 1/4 of Section 8, The East of the Third Principal Meridian, according recorded July 22, 1957, as Document No. 16964 | ownship 35 North ng to the plat to 102, in Cook Cou | , Range 14, hereof nty, Illinoi | 5 . |
| ***Signing for the sole purpose of waiving ho | mesteau rights** | * 972108 | 27 |
| | City of Chical | | |
| nereby releasing and waiving all rights under and by virtue of the Homestead | Date - 20 Tax Index 20 Receipt Nunt | niber 32-08 - 40 His of Illinois. 181 02 -00-311 | 17-010 119 |
| UBJECT TO: covenants, conditions, and restrictions of record, | Roal Estate Ti | rainstor Tax # 280 | 00 |
| Document No.(s); | | | |
| ; and to General Taxes for and subs | sequent years. | | |
| Permanent Real Estate Index Number(s): 32-08-407-010 Address(es) of Real Estate: 123 S. Mayfair Place, Chicago | Hoights II 6041 | | - |
| Address(es) of Real Estate: 123 3, May 1211 1120, Cittedgo | neights, in out | <u></u> | ~ |
| Dated this2ls+, | day of _March | , 19 <u>97</u> | - 1 |
| PLEASE Auril (Hammond (SEAL) - PRINT OR David. C. Hammond Sh | aron S. Hammond | (SEA) | .} |
| TYPE NAME(S) | | | |
| SIGNATURE(S) (SEAL) | BOY DOW | (SEAI | ر. |
| Maria de la companya della companya | BOX 32709 | 0827 | 20 ₁ |

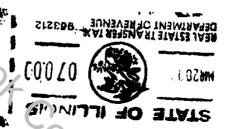
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Warranty Deed
Individual to Individual
TO

TO

GEORGE E. COLELEGAL FORMS





#T81 1174-8184

| State of Illin | ois, County of | Cook | | s_l, | the undersigned, a N | Notary Public in and | for |
|----------------|----------------|---|-----------------|---------------------------|----------------------|----------------------|-----|
| | | said County, in the State married to Sha | | | ner David | C. Hammond, | |
| | PRESS | personally known to me t | - | | () | | |
| | EAL IERE | foregoing instrument, as | peared before m | e this day in person | n, and acknowledg | ed thatthey | |
| r. | IERE | signed, sealed and delive purposes therein set forth | | | | | ınd |
| Given under i | ny hand and of | ficial seal, this | 21st | day of | March | 19 _9 | 7_ |
| Commission (| expires | | 19 | | | | |
| | • | | | | NOTARY PUBLIC | | |
| This instrume | nt was prepare | d by Metro Docume | ent Proces | sing Col (Name and Add | Bl4l Dixie, kess) | Homewood, 60430 | IL |
| | | | · | SEND SUBSEQU | ENT TAX BILLS | TO: | |
| | Patric | (Name) k O. Hammond | | Patrick O | | ····· | |
| MAIL TO: | | yfai rAdda ce o Heights, IL 6 | 0411 | 123 Mayfa | (Name) ir Place | | |
| | (| | | | (Address) | | |
| | | (City, State and Zip) | | Chicago H | eights, IL | 60411 | |
| ΔB | BECODE | BIS OFFICE BOX NO | OX 327 | | (City State and 2 | 7in) | |

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HANGE 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 in involved, it must be our with the NASAR . single last nar on every form

| me is adequate if you don't have enough room for the full name. Property index numbers MUST be included |
|---|
| PIN: |
| 32-108-407-010- |
| NAME Or |
| PATRICKCOHAMMOND |
| MAILING ADDRESS: |
| STREET NUMBER STREET NAME = APT or UNIT |
| 123 MAYFAIR PLACE |
| CITY |
| CHICAGO HITO |
| C'P A 'PP . 2 10. |
| STATE: ZIP: |
| 1 6 6 4 1 1 - 7 97210827 |
| 1 |
| 1 ω 0 4 1 1 - 97210827 |
| PROPERTY ADDRESS: STREET NUMBER STREET NAME = APT or UNIT |
| PROPERTY ADDRESS: 97210827 |
| PROPERTY ADDRESS: STREET NUMBER STREET NAME = APT or UNIT |
| PROPERTY ADDRESS: STREET NUMBER STREET NAME = APT or UNIT 123 MAY FAIR PLACE |
| PROPERTY ADDRESS: STREET NUMBER STREET NAME = APT or UNIT 123 MAY FAIR PLACE CITY |
| PROPERTY ADDRESS: STREET NUMBER STREET NAME = APT or UNIT 123 MAY FAIR PLACE CITY CHICAGO HTS |

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