The first of the f	WARRANTY DEED Statutory (Illinois)	OFFICIAL C	OP 3738	198 96							
L. SUBERG	MAIL TO: Edward Schussler 9631 153rd St., Ste. 35 Orland Park, IL 60462	-	DEPT-01 RECORDIN T40014 TRAN 255	· -	\$25.50						
いる人	NAME & ADDRESS OF TAX AVER: Paul W. Hensley 5212 W. 122nd Style Av	•	\$7784 \$ JLJ * COOK COUNTY R	*-97-389							
なり	Alsip, IL 60656 0	RECORDE	R'S STAMP	25.50	<u>,</u>)						
7	THE GRANTOR (S)	CE and DEBRA L. PRICE,	f/k/a DEBRA	L. SMILEY,							
ħ	of the Village of Use	County of Cook	State of 11	llinois	wife						
ሐ	for and in consideration of ten and 00 and other good and valuable considerations in the CONVEY AND WARRANT to PAT	·		DOLLARS	9						
<i>\</i>	1729 W. Vermont	Blue Island	IL	60406	₩						
0	Grantee's Address all interest in the following described Real Esta Illinois, to wit:	City te situated in the County ofCoo	State No. in the	Zip e State of	7389896						
Unit 5212-2A Together with its Undivided Arcentage Interest in the Common Elements in Royal Chateaux Concominium as Delineated and Defined in the Declaration Recorded as Document Number 93-477915, as Amended from time to time, in the East 1/2*Northwest 1/4 of Section 28, Township 37 North, Range 13, East of the Third Principal Meridian, in Cook County, Illinois											
	*OF THE		185382C								
}	hereby releasing and waiving all rights under ar	equired for legal - attach on separate 8 and by virtue of the Homestead Exempti		te of Illinois.							
	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` 	28-104-013-1045									
	Property Address: 5212 W. 122nd St										
	TATED ship	. 111	1097								

Robert W. Price (SEAL) (SEAL) e/k/a DEBRA L. PRICE, DEBRA L. SMILEY ROBERT W. PRICE (SEAL) (SEAL)

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

T39 7.9e

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STATE OF ILLINOIS
County of cook

1	
- 5	cc
- 6	33

THAT Robert 6. Debra Price personally known to me to be the same person(s) whose name is/are subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the said 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 5 day of Macy 1997. VILLAGE MASP NOTARY PUBLIC ASSESSED NOTARY PUBLIC ASSESSED NOTARY PUBLIC STATE OF ILLINOIS 1900.00 \$100.00	I, the undersigned, a Notary Public in and for said County. in the State aforesaid. DO HEREBY CERTIFY
instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the said 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 5 day of Mucy 1997. WILDEL MEALL WILDEL MEALL WILDEL MASSP 0162 \$200.00 Multiput Mildel of ALSP 0162 \$200.00 Multiput Mildel of ALSP 0162 \$100.00 Multiput Mildel of AL	
delivered the said 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	
Given under my hand and notarial seal, this	
My commission expires on	delivered the said instrument as their free and voluntary act, for the uses and purposes therein set
My commission expires on	· · · · · · · · · · · · · · · · · · ·
My commission expires on	<i></i>
My commission expires on	
O283 \$10.00 \$10.00 \$10.00 must Estate \$1.00 must Estate mayorize Stamp must Estate mayorize Must Estate mayorize Stamp must Estate mayorize Stamp must Estate mayorize Must Estate mayorize Stamp must Estate mayo	Till and and the second
TOFFICIAL SEAL VICTORIA MCCABE HOTARY FUBLIC, STATE OF ILLINOIS INTERESS SEAL HERE IMPRESS SEAL HERE NAME AND ADDRESS OF PREPARER: Robert C. Olson 3105 W. 111th St. Chicago, IL 60655 **This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 35 ILCS 5/3-5022). **REVENUE STAMP	try commission expires on 5 to 162
"OFFICIAL SEAL" VICTORIA MCCABE NOTARY PUBLIC, STATE OF ILLINOIS BY Commission Expires Nov. 12, 2000 IMPRESS SEAL HERE EXEMPT UNDER PRON SECTION 31-45, REAL ESTATE TRANSFER TAX LAW DATE: Buyer, Seller or Representative Chicago, IL 60655 ** This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 35 ILCS 5/3-5022). ** REVENUE STAMP ** REVENUE S	\$200.00 \$100.00 et m
VICTORIA MCCABE NOTARY PUBLIC, STATE OF ILLINOIS NY Commission Expires Nov. 12, 2000 IMPRESS SEAL HERE EXEMPT UNDER PROV. NAME AND ADDRESS OF PREPARER: Robert C. Olson 3105 W. 111th St. Chicago, IL 60655 ** This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 55 ILCS 5/3-5022). ** REVENUE STAMP ** REVENUE	Real Estate Revenue Stamp Revenue Stamp
IMPRESS SEAL HERE IMPRESS SEAL HERE EXEMPT UNDER PRON SECTION 31-45, REAL ROBERT C. Olson 3105 W. 111th St. Chicago, IL 60655 This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 55 ILCS 5/3-5022). REVENUE STAMP ROBERT OF RESTAMPS O 5 0 7 EXEMPT UNDER PRON SECTION 31-45, REAL ESTATE PRANSFER TAX LAW DATE: Buyer, Seller or Representative (Chap. 55 ILCS 5/3-5022).	"OFFICIAL SEAL" OLD
IMPRESS SEAL HERE IMPRESS SEAL HERE EXEMPT UNDER PROV. ROBERT AND ALTON ARAGRAPH SECTION 31-45, REAL ESTATE TRANSFER TAX LAW DATE: Buyer, Seller or Rep esentative Chicago, IL 60655 This conveyance must contain the name and address of the Grantee for tax biffing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 55 II.CS 5/3-5022). REVENUE STAMP REV	NOTARY PUBLIC, STATE OF ILLINOIS :
IMPRESS SEAL HERE IMPRESS SEAL HERE EXEMPT UNDER PROVAMENTAL SECTION 31-45, REAL SECTION 31-45, REAL ESTATE TRANSFER TAX LAW DATE: Buyer, Seller or Rep escritative Chicago, IL 60655 This conveyance must contain the name and address of the Grantee for tax biffing purposes: (Chap. 55 ILCS 5/3-5022). FEAL ESTATE TRANSACTION TAX RV-96 REVENUE STAMP ROBERDO SECTION 31-45, REAL Chicago, IL 60655 **This conveyance must contain the name and address of the person preparing the instrument: (Chap. 55 ILCS 5/3-5022).	CONTACTOR SERVICES FOR CITAL FOR
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Buyer, Seller or Representative Chicago, IL 60655 ** This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 55 ILCS 5/3-5022). **ALL ESTATE TRANSACTION TAX **AU-96 **EVENUE STAMP **BOOK 93	
3105 W. 111th St. Chicago, IL 60655 **This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 55 ILCS 5/3-5022). **ARVENUE STAMP **BOOG93** **REVENUE STAMP **BOOG93** **ARVENUE	DATE
Chicago, IL 60655 **This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 55 ILCS 5/3-5022). **AU-96 **EVENUE STAMP **REVENUE STAMP **BOSS ILCS 5/3-5022 **AU-96 **EVENUE STAMP **BOSS ILCS 5/3-5022 **AU-96 **EVENUE STAMP **BOSS ILCS 5/3-5022	ROBERT C. SISSII
This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 55 ILCS 5/3-5022). *** *** *** *** ** ** ** **	Buyer, sener or representative
ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap 55 ILCS 5/3-5022). *** *** *** *** *** ** ** **	Chicago, IL 60655
REAL RETATE TRANSPER TAX DEPARTMENT OF REVENUE 908935	ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap 55 ILCS 5/3-5022). *** *** *** *** ** ** ** **

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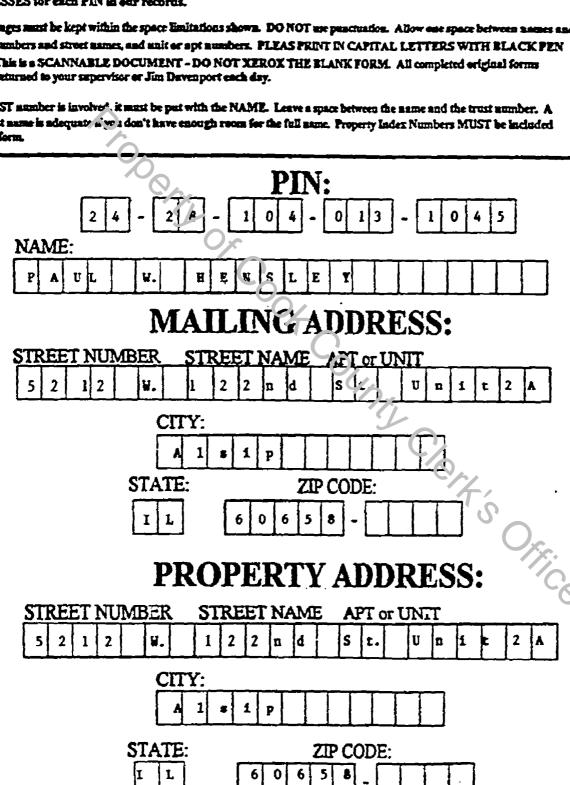
CHANGE OF INFORMATION FORM

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. PLEAS 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 Devenport 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 last name is adequate a wor don't have enough room for the full name. Property Index Numbers MUST be included on every form.



STREET NUMBER			<u>R</u>	STREET NAME						APT or UNIT									
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STATE: ZIP CODE:																			
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