DFFICIAL CC

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

COMPLIMENTS OF Chicago Title Insurance Company

CTIC Form No. 1158

## STATE OF ILLINOIS UNOFFICIAL COPY County of Cook'.

SIATE OF ILLINOIS OF A	IOIAL OOI I
County of Cook }	d for said County, in the State aforesaid, CERTIFY THAT
I, the undersigned, a Notary Public in an	d for said County, in the blate alcounty, are
kenneth w. Livery a beborum	1 1 1 1 1 formation instrumen
personally known to me to be the same person s	thave signed sealed and delivered the
appeared before me this day in person, and acknowledge	owledged thattherein set forth, including the release and waiver of the
instrument as Their free and voluntary act for the	owledged that the y Have signed, beater and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and purposes therein set forth, including the release and waiver of the uses and waiver of the use of the uses and waiver of the use of the uses and waiver of the uses and
right of homestead.	18 day of January 1977
Given under my hand and notarial seal, this	
	To had & a lella croce
. ا	- 27, 19 200 Notary Pub.
My commission expires on	
	<del>i</del>
······································	
RICHARD R. DELLA CROCE	
NOTARY PUBLIC, STATE OF ILLINOIS	
MY COMMISSION EXPIPES 7-27-2001	
	Cook COUNTY - ILLINOIS TRANSFER STAM
IMPRESS SEAL HERE	Cook COUNTY - ILLINOIS TRANSFER STAM
IMPRESS SEAL TIERL	
	1 Diales
* If Grantor is also Grantee you may want to stak	Release & Waiver of Homestead Rights.
	EXEMPT UNDER PROVISIONS OF PARAGRAPH
NAME and ADDRESS OF PREPARER:	· CECTION 4
Richard R. Della Croce	(e) SECTION 4,
9661 W. 143rd St., Suite 101	DATE DATE
Orland Park, IL 60462	DR#L
	Signature of Payer, Seller or Representative
rol	and address of the Grantee (3) tax billing purposes: (55 ILCS 5/3-5020
This conveyance must contain the name t	aring the instrument: (55 ILCS 5/3-5022).
and name and address of the person prepa	
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