FFICIAL COPY Form No. 11R AMERICAN LEGAL FORMS, CHICAGO, IL (312) 372-1922 Warranty Deed ENANCY BY THE ENTIRET 99094895 Statutory (ILLINOIS) 9336/0072 48 001 Page 1 of (Individual to Individual) 1999-01-28 11:10:49 CAUTION: Consult a lawyer before using or a Cook County Recorder including any warranty of merchantability or fitness for a particular purpor THE GRANTOR (NAME AND ADDRESS) Frank J. Beske and Shirley C. Beske, his wife, of 3945 W. 65th Place (The Above Space For Recorder's Use Only) City Chicago County __ of __ of the DOLLARS, and other good and valuable consideration Cook for and in consideration of ten and no/100-in hand paid, CONVEY s and WARRANT s to Rodolfo Rivera and Juana Rivera, his wife, of 4853 S. Marshfield Chicago, Il. 60609 MAMES AND ADDRESS OF GRANTEES) as husband and wife, not as Joint Tenants with rights of survivorship, nor as Tenants in Common, but as TENANTS BY THE ENTIRETY, the following describe keal Estate situated in the County of _ in the State of Illinois, to wit: (See reverse side tor legal description.) hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the Stag of Illinois.* TO HAVE AND TO HOLD said premises as husband and wife, not as Joint Tenants nor as Tenants in Common but as TENANTS BY THE ENTIRETY forever. SUBJECT TO: General taxes for 1998 and subsequent ve en and ___ and subsequent years and TO: General taxes for _ Subject to continues on back Permanent Index Number (PIN): 19-23-120-033 VOL Address(es) of Real Estate: 3945 W. 65th Place Chicago, Il. 60629 day of December 19 98 **DATED** this (SEAL) PLEASE PRINT OR TYPE NAME(S) **BELOW** (SEAL) SIGNATURE(S) Beske Cook ss. I, the undersigned, a Notiry Public in and for State of Illinois, County of ... said County, in the State aforesaid, DO HEREBY CERTIFY Mat Frank J. Beske and Shirley C. Beske his wife personally known to me to be the same persons whose names are subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that $\frac{t}{}$ $\frac{t}{}$ $\frac{t}{}$ 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. IMPRESS SEAL HERE day of December 17th Given under my hand and official seal, this _ $4/9/02_{1}X_{0}X$ Commission expires ___ This instrument was prepared by James E. Kostro & Assoc. 4528 S. Cicero Chicago, II. 60638-2116 (NAME AND ADDRESS)

SEE REVERSE SIDE ▶

*If Grantor is also Grantee you may wish to strike Release and Waiver of Homestead Rights.

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99094895 UNOFFICIAL COPY

Legal Description

of premises commonly known as

3945 W. 65th Place

Chicago, Il. 60629

THE NORTH 1/2 OF LOT 7 (EXCEPT THE WEST 32 1/2 FEET AND EXCEPT THE EAST 63 FEET 9 INCHES) IN BLOCK 4 IN MANDELL'S SUBDIVISION OF THE NORTH 1/2 OF THE SOUTH 1/2 OF THE NORTHWEST 1/4 OF SECTION 23, TOWNSHIP 38 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

STATE OF ILLINOIS

REAL ESTATE TRANSFER TAX

AMZ8199 DEPT. OF I I I U U

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Subject to: (continued)

(a) General real estate taxes for 1997 - 1998 and subsequent years; (b) Special Assessments confirmed after this contract date; (c) Building, building line and use or occupancy restrictions, conditions and covenants of record; (d) Zoning laws and ordinances; (e) Easements for public utilities; (f) Drainage ditches, feeders, laterals and drain tile, pipe or other conduit; (g) If the Property is other than a detached single-family home; party walls, party wall rights, and agreements; covenants, conditions and restrictions of record; terms, provisions, covenants and conditions of the declaration of condominium is any

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MAIL

REAL ESTATE TRANSACTION TAX

REVENUE

START SAME SET TO START SAME SET TO START SAME SET TO S

SEND SUBSEQUENT TAX BILES TO

MAIL TO:

Atty. James Jimenez
(Name)
6514 W. Cermak
(Address)
Berwyn, Il. 60402
(City, State and Zip)

Rodolfo Rivera

(Name)
3945 W. 65th Place
(Address)
Chicago, Il. 60629

(City, State and Zip)

OR

RECORDER'S OFFICE BOX NO. _____

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