QUIT CLAIM DEED

ILLINOIS

Γ

Above Space for Recorder's Use Only

| Address of Grantee-s), in the State of Illinois to wi | of the City of , f for and in consideration of TEN and 00/100 lerations in hand paid, CONVEY(s) and QUIT CLAIM(s) to (<i>Name and</i> of the following described Real Estate situated in the County of tt: (<i>See page 2 for legal description attached here to and made part here</i> nder and by virtue of the Homestead Exemption Laws of the State of | |
|---|--|--|
| | nt years; Covenants, conditions and restrictions of record, if any; | |
| | The date of this deed of conveyance is . | |
| (SEAL) | (SEAL) | |
| (SEAL) | (SEAL) | |
| State of Illinois, County of ss. I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that personally known to me to be the same person(s) whose name(s) is(are) subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he/she(they) signed, sealed and delivered the said instrument as his/her(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) Gi (My Commission Expires) | ven under my hand and official seal | |
| | Notary Public | |

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| | LEGAL DESCRIPTION | | |
|------------------------------------|-------------------------------|-------------------------------------|--|
| For the premises commonly known as | | | |
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| This instrument was prepared by: | Send subsequent tax bills to: | Recorder-mail recorded document to: | |
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