CORRECTIVE RECORDING AFFIDAVIT

THIS FORM IS PROVIDED COMPLIMENTS OF
THE COOK COUNTY CLERK,
AS A COURTESY FORM WHICH MAY BE USED TO DETAIL
A DESIRED CORRECTION TO A PREVIOUSLY RECORDED
DOCUMENT. CUSTOMER'S MAY USE THEIR OWN
AFFIDAVIT AS WELL, BUT IT MUST INCLUDE ALL OF THE
BELOW REQUIRED INFORMATION. THIS FORM DOES NOT
CONSTITUTE LEGAL ADVICE.

CONSTITUTE LEGAL ADV	ICE.	
PREPARER:		
CORRECTIVE RECORDING		RE-RECORDINGS, BUT INSTEAD OFFERS O UPDATE A PREVIOUSLY RECORDED LUS A CERTIFIED COPY OR THE ORIGINAL.
I,,THE /	AFFIANT, do hereby swear or affirm,	that the attached document with the document
number: in the State of Illinois, contained t	, which was recorded on: he following <u>ERROR</u> , which this affid	by the Cook County Clerk, avit seeks to correct:
·	• •	ON, PARAGRAPH, ETC.) OF ERROR AND WHAT IEEDED FOR EXPLANATION OR SIGNATURES.
to correct the aforementioned error	RIGINAL DOCUMENT, and this Correction was approver.	swear or affirm, that this submission includes ective Recording Affidavit is being submitted ed and/or agreed to by the original GRANTOR(S) or on a separate page for multiple signatures).
PRINT GRANTOR NAME ABOVE	GRANTOR SIGNATURE ABOV	/E DATE AFFIDAVIT EXECUTED
PRINT GRANTEE NAME ABOVE	GRANTEE SIGNATURE	DATE AFFIDAVIT EXECUTED
GRANTOR/GRANTEE 2 ABOVE	GRANTOR/GRANTEE 2 SIGNAT	URE DATE AFFIDAVIT EXECUTED
PRINT AFFIANT NAME ABOVE	AFFIANT SIGNATURE ABOV	E DATE AFFIDAVIT EXECUTED
NOTARY SECTIO	N TO BE COMPLETED AND FILLE	OOUT BY WITNESSING NOTARY
COUNTY)	SS	
Subscribed and sworn to me this	day, of ,	DATE AFFIDANTA NOTADIZED
PRINT NOTARY NAME ABOVE	NOTARY SIGNATURE ABOV	E DATE AFFIDAVIT NOTARIZED