

OFFICE OF THE CITY TREASURER Milwaukee, Wisconsin

January 19, 2022

Spencer Coggs City Treasurer

James F. Klajbor **Deputy City Treasurer**

Margarita M. Gutierrez Special Deputy City Treasurer

Robyn L. Malone Special Deputy City Treasurer

To:

Milwaukee Common Council

City Hall, Room 205

From: Erika Martinez
Tax Collection and Enforcement Coordinator

Re:

Request for Vacation of Inrem Judgment

Tax Kev No.: 2090289100

Address: 4720 W HAMPTON AV

Owner Name: LLEWELLYN L MC CALLA

Applicant/Requester: LLEWELLYN L MC CALLA

2021-2 Inrem File

Parcel: 25

Delinquent Tax Years: 2011-2021

Case: 21-CV-003565

Attached is a completed application for Vacation of Inrem Judgment and documentation of payment of costs.

The City of Milwaukee acquired this property on 11/30/2021.

JFK/em





OFFICE OF THE CITY TREASURER TAX ENFORCEMENT DIVISION

CITY HALL - ROOM 103 • 200 EAST WELLS STREET • MILWAUKEE, WISCONSIN 53202 TELEPHONE: (414) 286-2260 • FAX: (414) 286-3186 • TDD: (414) 286-2025

FORMER OWNER'S REQUEST TO VACATE IN REM TAX FORECLOSURE JUDGMENT

FOLLOW THE INSTRUCTIONS LISTED BELOW:

- Type or print firmly with a black ballpoint pen.
- Use separate form for each property.
- Refer to the copy of the attached ordinance for guidelines and eligibility. No written request to proceed under the ordinance may be submitted for consideration to the Common Council where more than 90 days has elapsed from the date of entry of the in rem tax foreclosure judgment to the date of receipt of the request by the City Clerk.
- Administrative costs totaling \$1,370 must be paid by Cashier's Check or cash to the City Treasurer prior to acceptance of this application.
- Complete boxes A, B, C, and D, sign, date the application, and include a copy of government issued photo ID.
- Forward completed application to the City Treasurer, 200 East Wells Street, Room 103, Milwaukee, WI 53202

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Α.	PROPERTY ADDRESS: 4720 W. Hampton Ave									
	TAX KEY NUMBER: 2090289100									
	NAME OF APPLICANT: Llewellyn McCalla D.O.B 09-12-1960									
	MAILING ADDRESS: 4720 W Hampton ave #4									
	CITY STATE ZIP CODE TELEPHONE NUMBER									
	EMAIL ADDRESS: GWEN 4720M agmail Com 21eprechansa									
В.	WAS THE PROPERTY LISTED IN "A" ABOVE YOUR PRIMARY RESIDENCE? YES NO DOWN NO									
	IS THE PROPERTY LISTED IN "A" ABOVE CURRENTLY OCCUPIED? YES NO									
C.	LIST ALL OTHER REAL PROPERTY IN THE CITY OF MILWAUKEE IN WHICH YOU HAVE AN OWNERSHIP INTEREST (If not applicable, write NONE.):									
	2109 W. BROWN Street 53205 ADDRESS ZIP COD									
	5522 N 58 th Street ADDRESS 53218 ZIP COD									
	ADDRESS ZIP COD									
	(Use reverse side, if additional space is needed.)									
D.	HAVE MONIES FOR ADMINISTRATIVE COSTS BEEN DEPOSITED WITH THE CITY TREASURER'S OFFICE? (Documentation must be attached.) YES NO									

property is restored to the former owner, applicant will indemnify and hold the City harmless from and against any cost or expense, which may be asserted against the City as a result of its being in the chain of title to the property. Applicant understands that if this request is withdrawn or denied the City shall retain all of the administrative costs applicant paid. There are no refunds.

APPLICANT'S SIGNATURE:	Dewellyn	mcCella	DATE:	01-14-202

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Office of the City Treasurer - Milwaukee, Wisconsin Administration Division Cash Deposit of Delinquent Tax Collection

Cashier Category	Cashier <u>Payclass</u>		Dollar <u>Amount</u>
1910		Delinquent Tax Collection	
	1911	City Treasurer Costs	220.00
	1912	DCD Costs	450.00
	1913	City Clerk Costs	200.00
	1914	City Attorney Costs	500.00
	•	Grand Total	1,370.00

Date 1/18/2022

Comments for Treasurer's Use Only

Administrative Costs - Request for Vacation of Judgment

File Number:

2021 - 2

WholeTaxkey:

209-0289-100-

Property Address:

4720 W HAMPTON AV

Owner Name

LLEWELLYN L MC CALLA

Applicant:

LLEWELLYN L MC CALLA

Parcel No.

25

CaseNumber:

21-CV-003565

State Bar of Wisconsin Form 3-2003 QUIT CLAIM DEED

6 9 4:0 7 4 Tx:40818860

DOC # 11182781

RECORDED:

Document Number	Document	Name	11/03/2021 08:22 AM ISRAEL RAMON REGISTER OF DEEDS					
THIS DEED, made between	Gwenevere Moore 'Bey		MILWAUKEE COUNTY, WI AMOUNT: 30.00					
	("Grantor,"	whether one or more),	FEE EXEMPT #: TRANSFER FEE: 36.00					
and Llewellyn McCalla		· · ·	TRANSFER TEE: 30:00					
	("Grantee	whether one or more).						
Grantor quit claims to Gran	ntee the following described real							
rents, profits, fixtures and	other appurtenant interests, in 1	Milwankee	\					
County, State of Wisconsin	("Property") (if more space is	needed, please attach	Recording Area					
addendum): The west 35 Feet of Lot 1. Bl	ock 1 Anna P. Wagner Homes, b	eing a subdivision of	Name and Return Address Llewellyn McCalla					
Lot 30. Block 2 of Assessmen	nt Subdivision No. 87 in the SE o	ne -quarter of Sec. 35,	6011 North 62nd Street					
Town 8 North, Range 21 Eas	t, City of Milwaukee, Milwaukee sment Subdivision No. 87 In the	County, Wisconsin,	Apt.3 Milwaukee, Wisconsion 53218					
Section 35. Town 8 North, R	ange 21 East, City of Milwaukee,	Milwaukee County,						
Wisconsin, excepting therefr	om the West 10 feet, the North 6	1.5 feet and the South						
55 Feet.			209-0289-100-6					
•	•		Parcel Identification Number (PIN)					
			This is homestead property.					
			(is) (is not)					
	·							
•	•	•						
	"innin		e e e					
Dated 10-29-0	303/ MENT HEW	34	∵ :					
Col parol	OTAR,		(SEAL)					
* Cover Moore	Bey = 0 AUBLIC	"						
1 Rogerelles and			(CD AT)					
* Heller Ixx	Cella MACCALLA MINISTERIO	Nist.	(SEAL)					
ATTELLEN	TICATION	AC	KNOWLEDGMENT					
Signature(s)	IICATION	STATE OF WISCONS	••					
		ΛΛ.Τ) ss.					
authenticated on		. <u>Malwa</u>	AUICLE COUNTY)					
		Personally came befor	e me on Ortober 29th 2011.					
*Gwenevere Moore 'Bey		the above-named						
TITLE: MEMBER STAT	E BAR OF WISCONSIN	to me known to be	the person(s) who executed the foregoing					
authorized by Wis. S	tat. § 706.06)	instrument and acknow	wledged the same.					
THIS INSTRUMENT DRA	AFTED BY:	X	A STATE OF THE STA					
Gwen Moore Bey		Notary Public, State o	Wisconsin					
		My Commission (is po	ermanent) (expires: $03/0/2023$)					
NOTE: THIS E	(Signatures may be authentica S A STANDARD FORM. ANY MODI © 2003 ST	ted or acknowledged. Both are FICATIONS TO THIS FORM ATE BAR OF WISCONSIN	not necessary.) SHOULD BE CLEARLY IDENTIFIED. FORM NO. 3-2003					

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* Type name below signatures.