

PARCEL NUMBER		LEGAL DESCRIPTION
ADDRESS OF PROPERTY		
DATE	NAME OF OWNER	
12-28-67	CITY OF SPRINGFIELD (PART OF CITY HOSPITAL)	
11-6-70	COMMUNITY HOSPITAL OF SPRINGFIELD AND CLARK COUNTY	
4-23-81	COMBINE 07-22-206-042 WITH 07-22-206-009, 044 & 048 TO MAKE 07-22-206-049	

07-22- 206-042

2.27 A

LEGAL DESCRIPTION

9-5-22 W MID PT N E QR (6)

CITY OF SPRINGFIELD (PART OF CITY HOSPITAL)

COMMUNITY HOSPITAL OF SPRINGFIELD AND CLARK COUNTY

COMBINE 07-22-206-042 WITH 07-22-206-009, 044 & 048 TO MAKE 07-22-206-049