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ATTORNEYS'
TITLE
GUARANTY
FUND,
INC.

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Doc#: 1416812018 Fee: \$44.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A.Yarbrough

Attorneys' Title Guaranty Fund, Inc.

FOR USE IN: ALL

1 S. Wacker Dr., STE 2400 Chicago, IL 60e06-4650

Prepared by ATG REsource® Attn: Search Department

Cook County Recorder of Deeds
Date: 06/17/2014 02:35 PM Pg: 1 of 4

1/2

ATG FORM 3007 © ATG (REV. 1/00) JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS	Ox				
COUNTY OF COOK					
n	0	1 .C 14	. 4l 6 00 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4		00:
Peter J. Pienta		•	the affiant, states ur		
2519 S. Eleanor Street	, in the City of				the affiant was
acquainted with	Colleen Pienta		edent; at the time of o		
State of IL	f a properly recorded joint tenan , and legally described as fo	uy deed, said proj llows:	perty located in	Cook	County,
See Attached for legal description	on.	Di	Clorts	0.0	
	n any business or partnership, no er with retention of a life intere				
The decedent died on8/	18/09	leaving no/a last	t will and testament;		
The total value of decedent's exthe value of the above property	state, including the taxable intere individually was \$ not taxable	st in the above p	roperty was \$ not tax	kable	, and
The State and Estate/Inheritance	e Tax and the Federal Estate Tax	x, if any, that was	due from the decede	ent's estate, has bee	n paid in full;
The affiant makes this affidave	it to induce Attorneys' Title Gu	aranty Fund, Inc	., (ATG®) to issue it	s policy of title in	surance on the

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The affiant hereby covenants and agrees, individually, and for the affiants, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold ATG harmless and to reimburse ATG for all loss, costs, damages, suits, attorney's fees, and expenses of every kind and nature that ATG may suffer, expend, or incur by reason of the issuance of said policy, free and clear of the following objections:

1. Claims against the estate of	Colleen Pienta	, the decedent;	
2. State Estate/Inheritance Tax and Federal	Estate Tax that may be charged aga	inst the estate of said decedent;	
3. Legacies, if any, created by the will of sa	id decedent;		
4. Rights of contribution.	\mathcal{Q}	\sim	
	Tetre	Tente	(Seal)
			(Seal)
Subscribed and sworn to before me this 21 day of May Niont's Thursa M Mayle		OFFICIAL SEAL THERESA M MACZKO DTARY PUBLIC - STATE OF ILLINOIS BY COMMISSION EXPIRES:03/16/15	
Notary Public			
Note: If the decedent left a will, it will be necess death certificate, together with evidence of paym	s, ary that the original or certified co ent (fd) ath taxes, if any, should ac	opy thereof be presented to ATG for ecompany this affidavit.	inspection. A
This instrument prepared by:	Return to:		
Mary Niego-McNamara	Mary Niego-M	cNamara	
Name	90.2	Name	
10653 S. Kostner Avenue	10653 S. Kostr	ner Avenue	

Oak Lawn, IL 60413

Address

B-CPT'S OFFICE

Oak Lawn, IL 60453

Address

City, State, Zip

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UNOFFICIAL COPY ATTORNEYS' TITLE GUARANTY FUND, INC.

LEGAL DESCRIPTION

Permanent Index Number:

Property ID: 17-29-307-064-0000

Property Address:

2518 S. Throop Chicago, IL 60608

Legal Description:

THE SOUTH 1/2 OF LOT 4 IN MANIERRE AND AIKEN'S SUBDIVISION OF LOTS 6 AND 7 IN BLOCKS 5 AND 6 IN THE BOW HE THIS OF COOK COUNTY CLERK'S OFFICE CANAL TRUSTEES' SUBDIVISION OF THE SOUTH FRACTIONAL 1/2 OF SECTION 29, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

ER IER A TON CALE ATH PECC 9D

CITY OF CHICAGO OFFICE OF VITAL RECORDS CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

`	1 4527
J	TI I

		- ·- · · · · · · · · · · · · · · · · ·							DAI	E ISSUED 08	1/12/200
COLLEEN PIENTA							SEX		OF DEATH		
COUNTY OF DEATH		AGE AT LAST		4 7 mm	<u> </u>	Tribe	FEMALE	AL	IGUST 0	8, 2009	
COOK	•	45 YEAF				DATE OF E	BIRTH IST 19, 1960	3			
CITY OR TOWN	,	1.45		HOSPITAL OR	OTHER					·	
CHICAGO		5.5					OLY CROS	SHOSP	TAL ·		
PLACE OF DEATH		FE			-				-	············	
HOSPICE FACILITY											
BIRTHPLACE CHICAGO, IL				Softman						EVER IN U.S. ARM FORCES? NO	4ED
RESIDENCE 2519 SOUTH ELEANC	OR STREET	<u></u>	APT.	. NO.	CITY OR	RTOWN				INSIDE CITY LIMITS YES	<u>,</u>
COOK	STA E ZIP COL		R'S NAME LES J REI	GOVIC					A TO FIRS	T MARRIAGE	
INFORMANT'S NAME PETER PIENTA	ORMANT'S NAME			RELATIONSHIP MAILING ADDRI			ANN M BURNS ESS HELEANOR STREET, CHICAGO, IL. 60608				
METHOD OF DISPOSITION	T _W	CE OF DISPOSITION					Y OR TOWN A				
CREMATION	K /	RISONS CREA		,		OMBARD,		NUSIAIE	1	DISPOSITION	
FUNERAL HOME						JIVIDA IU,	, 11.		AUGU	IST 11, 2009	
DALCAMO FUNERAL	HOME, 470 WES	T 2014 STRE	ET, CHI	CAGO, IL. 606	16						
FUNERAL DIRECTOR'S NAME BERNARD M DALCAN		C					FUNERAL DIF		LLINOIS LIG	CENSE NUMBER	
LOCAL REGISTRAR'S NAME							DATE FILED		I REGISTE	LAR	
TERRY MASON MD			$\mathbf{T}(\mathbf{O}_{A})$					T 11, 200			
CAUSE OF DEATH PAR	RT METASTATIC	, ADENOCARCI	NOMA, F	AIMARY UNKNO)WN			-		· · · · · · · · · · · · · · · · · · ·	
IMMEDIATE CAUSE (Final disease or condition	a						4 - 11	<u> </u>	3 \$		
resulting in death)	±		Due to ((of asis tuce o	4)	Maria di Baran					
	b				4			(Cuci	3.5		
	c	- 25 m	Due to ((or as a consequence o	i).		700			********	
'	G.	* 50									
DADT II Enter other sussificant		10 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		of as a consequence of			<u> </u>				
PART II. Enter other significant	conditions contributin	g lo death but not	resulting in	the underlying cau	ise given i	n PAHTI	Na			FORMED? NO	
										NGS USED TO DEATH? N/A	
DID TOBACCO USE CONTRIBUTE TO DEATH? FEMALE PI			NCY STAT	us				ANNER OF			
UNKNOWN		NOT PREGNANT WITHIN LAST YEAR			ψi	NATURA	<u>_</u>				
DATE OF INJURY		TIME OF INJURY		PLACE OF INJU	PΙΥ		······································	O,		INJURY AT WOR	IK?
LOCATION OF INJURY	: :									<u> </u>	
DESCRIBE HOW INJURY OCCU	RRED:			···				IF TE	PANS (C.7)	ATION INJURY, SPE	CIFY
ATTEND THE DECEASED?	DATE LAST SEEN A	EEN ALIVE WAS MEDICAL EXAMINER OR DATE F		DATE DE	ONOUNCED			TIME OF OPATA			
NO	UNKNOWN		CORONER CONTACTED? NO)		,			TIME OF DEATH 03:00 AM	
CERTIFIER PHYSICIAN			24 - 4			19 19 19		DAT	E CERTIFIE		
NAME, ADDRESS AND ZIP COD	F OF PERSON COMP	ETING CALIGE OF	DEATH	en e		904 (1,80°) -					<u></u>
PREM RUPANI, 2701 V	WEST 68TH STR	EET, CHICAG	O, ILLIN	OIS, 60629		•			93606. 'D3606	'S LICENSE NUMBER 1662	i



Chestral Massacra 12.

