

UNOFFICIAL COPY

REG# 94-97710
TO# 8409 SAG
COX 2511 **INDEPENDENT
ADMINISTRATOR'S DEED**
(Illinois)

96258486

MAIL TO: G. Steven Mink
104 E Roosevelt Rd #204
Wheaton, IL 60187

DEPT-01 RECORDING \$25.00
T0012 TRAN 9974 04/04/96 12:28:00
#3991 + CG *-96-258486
COOK COUNTY RECORDER

NAME & ADDRESS OF TAXPAYER:
DARREY PINTO
9209 S 83RD CT
HICKORY HILLS, IL 60457

RECORDER'S STAMP

THE GRANTOR RICHARD KENNEDY

As Independent Administrator of the Estate of DONNETTE M. HAISLEY
deceased, by virtue of letters of office still in effect issued to the Independent Administrator by the probate court of
Cook County, State of Illinois, in Case Number 95 P 5002

for and in consideration of One Hundred Forty-Five Thousand & No/100 (\$145,00.00) DOLLARS
and other good and valuable considerations in hand paid.

CONVEYS AND QUITCLAIMS to DARREY PINTO, ROSEANN PINTO and NICK PINTO
AS JOINT TENANTS

9209 South 83rd Court, Hickory Hills, Illinois 60457
Grantee's Address City State Zip

all interest in the following described Real Estate situated in the County of Cook, in the State of
Illinois, to wit:

Lot 9 in Block 13 in the Town of Matteson in the North East
1/4 of the North West 1/4 of Section 26, Township 35 North,
Range 13 East of the Third Principal Meridian, in Cook
County, Illinois.

Subject to: (1) Covenants, conditions and restrictions of record;
(2) Public and utility easements and roads and highways, if any;
(3) Real estate taxes for 1995 and subsequent years.

NOTE: If additional space is required for legal - attach on separate 8-1/2 x 11 sheet

Permanent Index Number(s): 31-26-103-015-0000

Property Address: 3750 West 216th Street, Matteson, Illinois 60443

DATED this 29th day of March 19 96

Richard Kennedy (SEAL)
INDEPENDENT ADMINISTRATOR
Richard Kennedy

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

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INDEPENDENT ADMINISTRATOR'S DEED

(Illinois)

cc: NC. 018

2 4 9 1 2 1



STATE OF ILLINOIS
REAL ESTATE TRANSFER TAX

PB. 10686

APR - 498 DEPT OF REVENUE 145.00

FROM

1 0 2 6 3 6

Cook County
REAL ESTATE TRANSACTION TAX
REVENUE STAMPS APR - 498 72.50

TO REORDER PLEASE CALL
MID AMERICA TITLE COMPANY
(708) 249-4041

** This conveyance must contain the name and address of the Grantee for tax billing purposes : (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument (Chap. 55 ILCS 5/3-5022).

Buyer, Seller or Representative

Chicago Heights, IL 60411

165 West 10th Street

McGrane Law Firm

Richard P. Gerardi

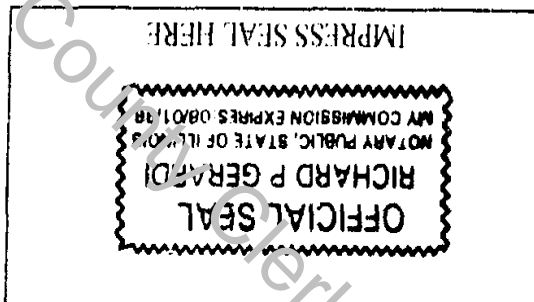
NAME AND ADDRESS OF PREPARER:

TRANSFER ACT

DATE:

EXEMPT UNDER PROVISIONS OF PARAGRAPH SECTION 4, REAL ESTATE

COUNTY - ILLINOIS TRANSFER STAMPS



Notary Public

My commission expires on August 1, 1998

Richard P. Gerardi

Given under my hand and notarial seal, this 29th day of March, 1996

therein set forth.

instrument as his/hor free and voluntary act, as such Independent Administrator, for the uses and purposes appeared before me this day in person, and acknowledged that he/~~he~~ assigned, sealed and delivered the said personally known to me to be the same person whose name is subscribed to the foregoing instrument,

THAT DONNETTE M. HAISLEY, Deceased
RICHARD KENNEDY, Independent Administrator of the Estate of
the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY

STATE OF ILLINOIS }
County of COOK }
ss

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STATE: IL ZIP: 60443

CITY: MAITESON

STREET NUMBER: 3750 WEST 216th STREET

PROPERTY ADDRESS: STREET NAME = APT or UNIT

STATE: IL ZIP: 60457

CITY: HICKORY HILL

STREET NUMBER: 9209 S 83rd STREET

MAILING ADDRESS: STREET NAME = APT or UNIT

NAME: DARRRY SPINTO

PIN: 31-26-103-015-0000

98485236

INFORMATION TO BE CHANGED

Use this form for name/address desired on real property tax record of Cook County Illinois. It is also to acquire PROPERTY ADDRESSES for each PIN in our records. Such changes must be kept within the space limitations shown. Do Not use punctuation. Allow one space between names and initials, numbers and street names, and unit or apt numbers. PLEASE PRINT IN CAPITAL LETTERS WITH BLACK PEN ONLY! This is a SCANNABLE DOCUMENT - DO NOT XEROX THE BLANK FORM. All completed ORIGINAL forms must be returned to your supervisor or Jim Davenport each day. If a TRUST number is involved, it must be put with the NAME. Leave a space between the name and the trust number. A single last name is adequate if you don't have enough room for the full name. Property index numbers MUST be included on every form.

MAP SYSTEM

CHANGE OF INFORMATION FORM

43388

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