

# UNOFFICIAL COPY

## TRANSFER ON DEATH INSTRUMENT



Doc#: 1623713014 Fee: \$40.00  
RHSP Fee: \$9.00 RPRF Fee: \$1.00  
Karen A. Yarbrough  
Cook County Recorder of Deeds  
Date: 08/24/2016 12:31 PM Pg: 1 of 2

**Owners (Grantors)/Taxes  
to:  
Robert C. Peters and Sarah  
C. Peters  
5430 N. Broadway, Unit A  
Chicago, IL 60640  
Prepared by and return to  
Owner  
Beneficiary's name and address are shown below**

Area above for county recorder use only

I, Robert Peters and I, Sarah Peters (referred to hereinafter as "Owners"), of 5430 N. Broadway, Chicago, Illinois 60640, being of sound mind and memory, do hereby make, declare, and publish this Transfer on Death Instrument, and state as follows:

That we are the sole owner(s) of the residential real estate located in Cook County, Illinois having the legal description:

LOT 12 AND THE SOUTH 12 1/2 FEET OF LOT 11 BLOCK 8 IN COCHRAN'S 3<sup>RD</sup> ADDITION TO EDGEWATER, IN SECTION 8, TOWNSHIP 40 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property Address: 5430 North Broadway, Chicago, Illinois 60640

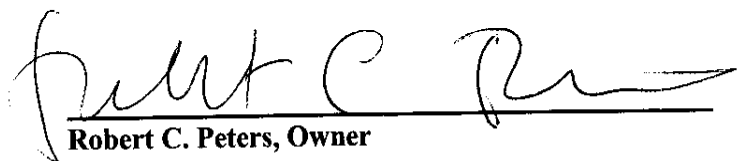
Parcel Identification/Index Number: 14-08-113-023-0000

That, effective upon upon the death of the Owner last to die, we convey and transfer the above-described real estate to the following Beneficiary and we hereby waive and release all rights under the homestead exemption laws of the State of Illinois:

Robert C. and Sarah C. Peters Living Trust dated August 23, 2016

If any interest in the above-described residential real estate becomes transferable to a person who is a minor, the transfer shall be made for the benefit of that minor to his or her legal guardian, if any, otherwise to a parent, or if none are living, then to his or her nearest living adult kindred who is also a Designated Beneficiary hereunder, or if none, then to the person's nearest living adult kindred, as custodian for the minor under the Illinois Uniform Transfers to Minors Act until the age of 21.

Signed this 23rd day of August, 2016

  
Robert C. Peters, Owner

Sarah C. Peters, Owner

REVIEW 

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Witnesses (2 are required)

We, the undersigned witnesses, DO HEREBY CERTIFY:

- 1) The person identified in this Transfer on Death Instrument as Owner signed this Instrument in our presence on the date shown above.
- 2) We signed this Instrument in the presence of the Owner and in the presence of each other.
- 3) We believed the Owner to be of sound mind and memory at the time of signing.

Deborah M. Mihm  
 Witness signature

Deborah Mihm  
 Printed name

5060 N. Marine Dr  
 Street address

Chicago, IL 60640  
 City, state, zip code

Betty Rodriguez  
 Witness signature

BETTY RODRIGUEZ  
 Printed name

9040 MAR MARA  
 Street address

Morton Grove, IL 60053  
 City, state, zip code

STATE OF ILLINOIS

County of Cook

) ss  
)

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT **Robert C. Peters and Sarah C. Peters** and the above-named witnesses, each of whom are either personally known to me or presented satisfactory identification, are the same persons whose names are subscribed to the foregoing Instrument and appeared before me this day in person, and acknowledged that they signed, sealed and delivered said instrument as their free and voluntary acts, for the uses and purposes therein set forth.

Given under my hand and notarial seal, this 23rd day of August, 2016.



(Seal)

Janna Dutton  
 Janna Dutton, Notary Public  
 My commission expires December 11, 2019.

Exempt under provisions of Paragraph E, Section 31-41, Real Estate Transfer Tax Law.

8/23/16  
 Date

[Signature]  
 Representative