**PREPARED BY:** 

Erika M Lopez 3649 Hawthorne St Franklin Park IL 60131

PROPERTY OWNER INFORMATION:

Erika M Lopez 3649 Hawthorne St Franklin Park IL 60131 Doc# 1807806109 Fee \$40.00

RHSP FEE: \$9.00 RPRF FEE: \$1.00

KAREN A.YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 03/19/2018 10:56 AM PG: 1 OF 2

#### TRANSFER ON DEATH INSTRUMENT (TODI)

STATUTORY (ILLINOIS)

THIS TRANSFER C F DEATH INSTRUMENT (hereinafter referred to as a 'TODI', which was executed on this 16th day of MARCH in the year 2018, by ERIKA M LOPEZ who resides at 3649 HAWTHORNT ST FRANKLIN PARK IL 60131 COOK COUNTY being of sound mind and disposing memory, do hereby make, declare and publish this TODI stating as follows:

That the above reference property owner is the **SOLE** owner of residential real estate under a duly recorded **DEED**, recorded **10/14/2014** as document number **1428734085** in the County of **COOK**, State of Illinois. The residential real estate is legally described as:

LOT 4, EXCEPT THE NORTH 20 FEET THREOF, IN BLOCK 6, IN THE 2ND ADDITION TO FRANKLIN PARK, BEING THE SOUTHWEST QUARTEP OF THE NORTHEATS QUARTER OF SECTION 21, TOWNSHIP 40 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. PIN NUMBER 12-21-207-050-0000

Property commonly referred to address:

## 3649 HAWTHORNE ST FRANKLIN PARK ILLINO'S COOK COUNTY

The owner, being of competent mind and capacity, and waving and releasing all rights under the Homestead Exemption of the State of Illinois, do hereby convey and transfer, effective on death of the Owner last to die, the above-described real

### **BENEFICIARY DESIGNATION:**

NAME: GERARDO SANDOVAL 100%

ADDRESS: 4408 GRACE ST SCHILLER PARK IL 60176 COOK COUNTY

IN THE EVENT THE BENEFICIARY (GERARDO SANDOVAL) PREDECEASED THE OWNER. (ERIKA M LOPEZ).

ALTERNATE BENEFICIARY DESIGNATION:

NAME: GERARDO K SANDOVAL 100%

ADDRESS: 3649 HAWTHORNE ST FRANKLIN PARK IL 60131 COOK COUNTY

IN THE EVENT THE ALTERNATE BENEFICIARY (GERARDO K SANDOVAL) PREDECEASED THE FRIMARY BENEFICIARY

(ERIKA M LOPEZ) AND THE OWNER (GERARDO SANDOVAL)

SECONDARY ALTERNATE BENEFICIARY DESIGNATION:

NAME: STEPHANIE N SANDOVAL 100%

ADDRESS: 4408 GRACE ST SCHILLER PARK IL 60176 COOK COUNTY

TRANSFER ON DEATH INSTRUMENT (TRANSFER TAX STAMP, EXEMTION, WITNESS & NOTARY)

1807806109 Page: 2 of 2

# **UNOFFICIAL COPY**

PAGE 2 OF 2

NAME OF OWNER:

**ERIKA M LOPEZ** 

THIS TRANSFER IS EXEMPT UNDER PROVISIONS OF 35 ILCS 200/31-45, PARAGRAPH, ILLINOIS REAL ESTATE TAX

3-16-2019

SIGNATURE OF OWNER OR REPRESENTATIVE

## WITNESS DECLARATION

We, the undersigned witnesses, hereby certify that the above Transfer on Death Instrument was on the date thereof signed and declared by the Owner(s) as his/her/their Transfer on Death Instrument in our presence and that we, at his/her/their request and in his/her/their presence and ir(ti)e presence of each other, have signed our names as witnesses thereto, believing to the best of our knowledge that the Owner(s) was/were at the time of signing of

|                     | sound mind and memory, and under no undue initiance.  |                 |                     |  |
|---------------------|---|-----------------|---------------------|--|
|                     | Idalia Ac   | <u>Jala</u>     | Idali Lipla         | 37438 N. Grand Blud Lake Villa                               |
|                     | WITNESS 1 PRINT   | ED NAME         | WITHESS 1 SIGNATURE | WITNESS 1 ADDRESS  |
| 01                  | ena Kealim  | <u> QRKO</u> VA | 1 - Es Timas        | 8625 W. FOSTER AVE apt #3B CA<br>WITNESS 2 ADDRESS 14 606 56 |
|                     | WITNESS 2 PRINT   | ED NAME         | WITNESS 2 GNATURE   | WITNESS 2 ADDRESS 14 60656                                   |
|                     |   |                 |                     |  |
| NOTARY VERIFICATION |   |                 |                     |  |
|                     |   |                 |                     | <b>5</b>   |
|                     | STATE OF ILLINOIS   | )               |                     | ) x,   |
|                     |   | ) SS            |                     |  |
|                     | COUNTY OF COOK  | )               |                     |  |
|                     | I, the undersigned, a notary public in and for said County, in the State aforesaid. DO HEREBY CERTIFY that Owner  |                 |                     |  |
|                     | and witnesses personally known to me to be the same persons whose names are subscribed on the foregoing   |                 |                     |  |
|                     | instrument, appeared before me this day in person and acknowledged that they signed, sealed, and delivered the  |                 |                     |  |
|                     | said instrument as their free and voluntary act, for the uses and purposes therein set forth.  Given under my hand and notarial seal this $10^{10}$ day of $10^{10}$ 20 $10^{10}$ . |                 |                     |  |
|                     |   |                 |                     |  |
|                     |   |                 | A day Day           |  |
|                     | NOTARY PUBLIC SIGN  | IATURE: //      | unce Rame           | <u>ne</u>  |
|                     |   |                 | (/                  | > "/_  |
|                     |   |                 | <u> </u>            | C.O  |
|                     | MOTARY BURLIC STAF  | MD-             |                     |  |

OFFICIAL SEAL VANCY RAMIREZ **NOTARY PUBLIC - STATE OF ILLINOIS** MY COMMISSION EXPIRES 03/21/2020