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DOCUMENT PREPARED BY: Larry Magill & Associates, P.C. 555 Skokie Blvd., Suite 500 Northbrook, Illinois 60062 Doc# 1813849130 Fee \$40.00 MAIL SUBSEQUENT TAX BILLS TO: RHSP FEE:\$9.00 RPRF FEE: \$1.00 Cynthia Janke KAREN A. YARBROUGH 745 Falls Circle COOK COUNTY RECORDER OF DEEDS DATE: 05/18/2018 03:41 PM PG: 1 OF 2 Lake Forest, Illinois 60045 CCRD SPECIAL NOTICE: THIS IS A NON-MANDATORY COURTESY FORM, ALLINGTON LEGAL ADVICE IN ANYWAYI NOTICE OF DEATHOREIDAVIT & ACCEPTANCE OF TRANSFER ON DEATH INSTRUMENT (TODI) DEED Pursuant to §755 ILCS 27/75. Sec. 75. Notice of death affidavit, the undersigned beneficiary/beneficiaries, having been duly sworn and under oath, do stric the following: That, Frederick W. Castle Jr. died on June 16, 2017 County, Illinois, as owner of the Property Identification Number: as a resident of With the Legal Description Coattach exhibit if more room is needed): LOT THREE (3) IN GLENVIEW EAST, BEING A SUBDIVISION OF THE NORTH WEST QUARTER OF THE NORTH WEST QUARTER OF THE NORTH WEST QUARTER (EXCEPT THE SOUTH 65 56 FEET THEREOF) IN SECTION THIRTY-ONE (31), TOWNSHIP FORTY-TWO (42) NORTH, RANGE THIRTEEN (13), EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, ACCORDING TO THE PLAT THEREOF RECORDED AUGUST 12, 1955 AS DOC JMEN F 16330547 IN COOK COUNTY, ILLINOIS. And Common Address Of: 411 E. Lake Avenue, Glenview, Illinois 60025 And Furthermore, the aforementioned owner (who is now deceased) recorded a Transfer or Der th Instrument (TODI) on September 22, 2016 as Document Number: 1626650138 ___ naming the following beneficiary/beneficiaries as the successive owner(s) of the property referenced above with the stated percentage/share of said property: SHARE: ADDRESS: NAME: Cynthia Janke 745 Falls Circle, Lake Forest, IL 60045 1/3 Susan Castle 13 Lackey Drive, Williams Bay, WI 53191 1/3 Catherine Dod 2390 Ridge Drive, Northbrook, IL 60062 1/3

This FORM is Compliments of:



KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

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COOK COUNTY RECORDER OF DEEDS NOTICE OF DEATH AFFIDAVIT & TRANSFER ON DEATH INSTRUMENT (TODI) DEED PAGE 2 OF 2 (COURTESY FORM)

| In witness whereof, the under on Death Instrument, this | rsigned benefi 8th | ciaries hereby (day) of | accept the tra | | 2010 | |
|---|-----------------------|----------------------------|-----------------------------|--|------------|---------------|
| on Death instrument, this | | (uay) oi | j | (month), | | (year) |
| | | eneficiary Nam | ne & Signature | Section: | | |
| Catherine Do | | | | | | |
| Print Beneficiary Name Above | | | | Print Beneficiary Name | e Above | |
| Cathosin | e Do | ·l | | | | |
| Eereficiary Sig | gnature Above | | | Beneficiary Signature | Above | |
| Print Benefician | y Na lie Above | | | Print Beneficiary Name | e Above | _ |
| Beneficiary Signature Above | | | | Beneficiary Signature Above | | |
| Print Beneficiar | y Name Above | 97 | $\mathcal{C}_{\mathcal{C}}$ | Print Beneficiary Name | Above | _ |
| Beneficiary Sig | gnature Above | | 4/2 | Beneficiary Signature | Above | _ |
| | | Notary F | Public Section. | | | |
| STATE OF ILLINO | | | | C_{λ} | | |
| COUNTY OF Cook | _ | | | 0/4/ | | |
| I, the undersigned, a Nota | ry Public in and | for the State at | oresaid, DO HE | REBY CERTIFY THAT | | |
| Cath | erine Do | bc | | C | /Sc. | |
| | | | | ersonally before you ABO | 0 | _ |
| | | | | or names are subscribed to the above foregoing affida | · - | |
| Signed and sworn to before | re me this | - (day) | of May | /(month),201 | (year). | ₁ |
| Signature of Not | ary Above | : | ~~~~ 1 XI331A | OFFICIAL SEAL | ** | |
| Niovi Ballis Print Name of No | tary Above | _ | NOTA MY | NCNIOVI BALLISTA A / E RY PUBLIC - STATE OF ILLINOIS COMMISSION EXPIRES:10/05/20 | A LIMES | |
| | | KARF | N A V | ADRDOIL | <u>'LJ</u> | · |

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