

UNOFFICIAL COPY

THIS INSTRUMENT WAS PREPARED BY:

Willie J. GANT
6152 S. DAMEN RD

CHICAGO, IL 60636
NAME & ADDRESS OF PROPERTY OWNER:

Willie J. Gant
6152 S. DAMEN
CHICAGO, ILLINOIS 60636



Doc# 1818708008 Fee \$40.00

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

KAREN A. YARBROUGH

COOK COUNTY RECORDER OF DEEDS

DATE: 07/06/2018 11:47 AM PG: 1 OF 2

ILLINOIS RESIDENTIAL TRANSFER ON DEATH INSTRUMENT (TODI) PURSUANT TO § 755 ILCS 27/1 ET SEQ.

THIS TRANSFER ON DEATH INSTRUMENT (hereinafter referred to as a "TODI"), which was completed and signed before a notary public on the following date: 7-6-18, by the property owner or owners, whose name is or are: Willie J. GANT

and currently live at the street address of: 6152 S. DAMEN RD

in the city of: CHICAGO, and county of: COOK, in the state of: ILL

with a zip code of: 60636, while being of sound mind and disposing memory, do now hereby make, declare and publish this TODI, stating and attesting to the following. That the above referenced property owner or owners, is or are, the **SOLE** owner(s) of the residential (which must be between 1 - 4 units) real estate, under a duly recorded **DEED** or other **CONVEYANCE INSTRUMENT** which was recorded on the date of: 5/27/2010 as document number: 1014112122 with the proper County Agency in the County of: _____ in the State of Illinois. Furthermore, this TODI is intended to transfer the following real property:

LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN BELOW -OR- SEE ATTACHED

The South 10 Feet OF Lot 21 and Lot 22 (except the South 5 feet There of) IN HINKAMP and Company's 63rd and Robey Subdivision, Being a Resubdivision OF Part OF Circuit Court Partition OF Blocks 1 and 8 in the Subdivision OF the South 1/2 OF the Southwest 1/4 OF Section 18, Township 38 North, Range 14 East OF the Third Principal Meridian, IN COOK COUNTY, ILLINOIS

PROPERTY IDENTIFICATION NUMBER (PIN): 20-18-309-054-0000

COMMONLY REFERRED TO ADDRESS: 6152 South Damen
Chicago Illinois 60636

Finally, the owner, or owners, while also being of competent mind and capacity, while waiving and releasing all rights under the Homestead Exemption laws of the State of IL, do now hereby **CONVEY** and **TRANSFER**, effective upon the death of the above-named **OWNER**, or last to die of the **OWNERS**, the above-described real property to the named **BENEFICIARY** or **BENEFICIARIES** on the following page in the specified **TENANCY TYPE** if multiple **BENEFICIARIES**.

SPECIAL NOTICE: This form is provided compliments of **KAREN A. YARBROUGH, COOK COUNTY RECORDER OF DEEDS** and **DOES NOT CONSTITUTE LEGAL ADVICE** in any way, shape or form. Furthermore, it is provided **WITHOUT** any **TITLE EXAMINATION** or **REVIEW** of your individual estate plan. **PLEASE CONTACT AN ATTORNEY OR LICENSED ESTATE PLANNING PROFESSIONAL** if you have additional questions, comments or concerns regarding how to complete this form, as the **COOK COUNTY RECORDER OF DEEDS OFFICE STAFF MAY NOT** assist you with the preparation of this, or any, legal document.

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TRANSFER ON DEATH INSTRUMENT - PAGE 2 (THIS INSTRUMENT IS EXEMPT PURSUANT TO § 35 ILCS 200/31-45, PARA. IL REAL ESTATE TRANSFER TAX LAW)

As referenced on the foregoing page, the aforementioned OWNER or OWNERS do now hereby CONVEY and TRANSFER, effective upon the death of the above-named OWNER, or last to die of the OWNERS, the above-described real property to the named BENEFICIARY or BENEFICIARIES in the specified TENANCY TYPE if multiple BENEFICIARIES are listed. Additionally, in the event the BENEFICIARY or BENEFICIARIES pre-decease the OWNER or OWNERS, the following CONTINGENCY BENEFICIARY or BENEFICIARIES should receive the interest outlined in this instrument, in the designated TENANCY TYPE:

<u>BENEFICIARY (A)</u>	<u>BENEFICIARY (B)</u>	<u>BENEFICIARY (C)</u>	<u>BENEFICIARY (D)</u>
<u>Yvette Davis</u>	_____	_____	_____
<u>6700 S. South Shore dr</u>	_____	_____	_____
<u>19C</u>	_____	_____	_____
<u>Chicago, Illinois 60649</u>	_____	_____	_____

If more BENEFICIARIES are desired, please attach separate sheet of paper with the full names and addresses of the desired additional BENEFICIARIES. Also, if there are multiple beneficiaries, the OWNER or OWNER desires that the transfer be to those BENEFICIARIES IN THE FOLLOWING TENANCY TYPE:
CHOOSE ONE (ONLY): JOINT TENANTS IN COMMON W/ RIGHT OF SURVIVORSHIP -OR- TENANTS IN COMMON W/O RIGHT OF SURVIVORSHIP

In the event all of the above-referenced BENEFICIARIES pre-decease the owner/owners, the following CONTINGENCY BENEFICIARIES shall replace them.

<u>CONTINGENCY BENEFICIARY (A)</u>	<u>CONTINGENCY BENEFICIARY (B)</u>	<u>CONTINGENCY BENEFICIARY (C)</u>	<u>CONTINGENCY BENEFICIARY (D)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I, or we, the SOLE OWNERS hereby swear and affirm that the foregoing wishes were made as my or our free and voluntary act for the purposes set forth.

PRINT OWNER NAME (A): <u>Willie J. Gant</u>	PRINT OWNER NAME (B): _____
SIGNATURE OF OWNER (A): <u>Willie J. Gant</u>	SIGNATURE OF OWNER (B): _____
DATE SIGNED BEFORE NOTARY: _____	DATE SIGNED BEFORE NOTARY: _____

WITNESS DECLARATION - THIS SECTION IS TO BE ATTESTED TO AND SIGNED IN THE PRESENCE OF THE OWNER/OWNERS, ALL WITNESSES, AND NOTARY PUBLIC:
We, the undersigned witnesses, hereby certify that the foregoing TODI was executed and signed on the date referenced above, and signed by the owner or owners as her, his, or their voluntary TODI in our presence, at the request of her, him or them, and while also in the presence of one another. We also do now hereby swear and affirm that we are signing our names to this instrument with the belief and knowledge that the owner or owners, was or were, at the time of signing of sound mind and memory, and free from any undue influence or coercion by any parties, including us as witnesses.

PRINT WITNESS NAME (A): <u>Valerie L. Brinker</u>	PRINT WITNESS NAME (B): <u>Alice Gant-Thomas</u>
SIGNATURE OF WITNESS (A): <u>Valerie L. Brinker</u>	SIGNATURE OF WITNESS (B): <u>Alice Gant-Thomas</u>
DATE SIGNED BEFORE NOTARY: <u>7-6-18</u>	DATE SIGNED BEFORE NOTARY: <u>7-6-18</u>

NOTARY VERIFICATION SECTION:

STATE OF <u>IL</u>)	DATE NOTARIZED: <u>7/6/18</u>
COUNTY OF <u>COOK</u>) SS	

I, the undersigned, a notary public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that the owner or owners, and witnesses, personally known to me to be the same persons whose names are subscribed on the foregoing instrument, appeared before me on the below date and signed, sealed and delivered the foregoing instrument as their free and voluntary act, for the uses and purposes therein set forth.

PRINT NOTARY NAME: RICHARD CROWE SIGNATURE OF NOTARY: Richard Crowe

AFFIX NOTARY STAMP BELOW:

