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THIS INSTRUMENT WAS PREPARED BY:

Atty. Cindy Cannizzaro
5357 W. Devon Ave.
Chicago, IL 60646

NAME & ADDRESS OF PROPERTY OWNER:

Jeanne M. Follman 235 Ridge Rd., Apt. 2G Wilmette, II. 60091

Doc#	1902206378	Fee	\$42 (Йı
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RHSP FEE: \$9.00 RPRF FEE: \$1.00

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 01/22/2019 02:31 PM PG: 1 OF 3

THIS TRANSFER ON DEATH INSTRUMENT (hereinafter referred to as a "TODI"), which was completed and signed before a notary public on the following date:

November 9, 2018 , by the property owner or owners, whose name is or are:

EGAL DESCRIPTION:	CHECK WHICH APPLIES -	WRITTEN BELS#	-OR-	SEE ATTACHED	ХХ
EGAL DESCRIPTION:	CHECK WHICH APPLIES -	WRITTEN BELS#	-OR-	SEE ATTACHED	

PROPERTY IDENTIFICATION NUMBER(PIN): 05-33-301-063-7016

COMMONLY REFERRED TO ADDRESS: 235 Ridge Road, Unit 2G, Assigned Parking: indoor #21, outdoor #21, Wilmette, IL 60091

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 II, do now hereby **CONVEY** and **TRANSFER**, effective upon the death of the above-named **OWNER**, or last to die of the **DWNERS**, 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 <u>KAREN A. YARBROUGH</u>, COOK COUNTY RECORDER OF DEEDS and <u>DOES NOT CONSTITUTE LEGAL ADVICE</u> in any way, shape or form. Furthermore, it is provided <u>WITHOUT</u> any <u>TITLE EXAMINATION</u> or <u>REVIEW</u> of your individual estate plan. <u>PLEASE CONTACT AN ATTORNEY OR LICENSED ESTATE PLANNING PROFESSIONAL</u> if you have additional questions, comments or concerns regarding how to complete this form, as the <u>COOK COUNTY RECORDER OF DEEDS OFFICE STAFF MAY NOT</u> 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 LAV					
As referenced on the foregoing page, the aforementioned <u>OWNER</u> or <u>OWNERS</u> do now hereby <u>CONVEY</u> and <u>IRANSFER</u> , 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 OWNER	<u>.S</u> ,				
the following CONTINGENCY BENEFICIARY or BENEFICIARIES should receive the interest outlined in this instrument, in the designated TENANCY TYPE :					
BENEFICIARY (A) BENEFICIARY (B) BENEFICIARY (C) BENEFICIARY (C	J)				
My two daughters, in equal shares, per stirpes:					
ELIZABETH M. QUANCARD 3828 Georgia Ave NW 1pt 305					
(tenant in common) Washington, DC 20011					
5-10 Sunset Road CLARE M. (MAHONEY					
Winnaka, Il 60093 (tenant in common)	_				
If more BENEFICIARIES are sesired, please attach separate sheet of paper with the full names and addresses of the desired additional BENEFICIARIES .					
Also, if there are multiple baneficiaries, the OWNER or OWNER desires that the transfer be to those BENEFICIARIES IN THE FOLLOWING TENANCY TYPE					
CHOOSE ONE (ONLY): JOINT TEXACTS IN COMMON W/ RIGHT OF SURVIVORSHIP -OR- TENANTS IN COMMON W/O RIGHT OF SURVIVORSHIP					
In the event all of the above-reference of the continuence of the sevent all of the above-reference of the continuence of the c					
CONTINGENCY BENEFICIARY (A) CONTINGENCY BENEFICIARY (B) CONTINGENCY BENEFICIARY	(n)				
If ELIZABETH predeceases me, If CLARE predeceased me, her share shall go to her her share shall go to her					
ner bibeer if but hab					
no surviving children. Surviving children.					
I, or we, the SOLE DWNERS hereby swear and affirm that the foregoing witnes vere made as my or our free and voluntary act for the purposes set for	.h.				
PRINT OWNER NAME (A): Jeanne M. Follman ; KINT OWNER NAME (B):	_				
20 DM - CO SIGNED (D)					
SIGNATURE OF OWNER (A): X Deanne Molling SIGNATURE OF OWNER (B):	_				
DATE SIGNED BEFORE NOTARY: November 9, 2018 DATE SIGNED LEFORE NOTARY:					
BATE BIBLES BET BRE HOTBITT	_				
WITNESS DECLARATION - THIS SECTION IS TO BE ATTESTED TO AND SIGNED IN THE PRESENCE OF THE OWNER JUPIERS, ALL WITNESSES, AND NOTARY PUBL	<u>C:</u>				
We, the undersigned witnesses, hereby certify that the foregoing TOOI was executed and signed on the date referenced above, and signed by the owner or					
owners as her, his, or their voluntary TOOl in our presence, at the request of her, him or them, and while also in the presence of one another. We also do not be a first the course of the presence of the state of the best of the presence of the presence of the state of the presence of the presence of the state of the presence of the presence of the state of the presence of the pr					
hereby swear and affirm that we are signing our names to this instrument with the belief and knowledge that the owner of owners, was or were, at the time signing of sound mind and memory, and free from any undue influence or coercion by any parties, including us as witnessed.	; UI				
PRINT WITNESS NAME (A): Giggiola Marsano PRINT WITNESS NAME (B): Chriscian Carini					
SIGNATURE OF WITNESS (A) SIGNATURE OF WITNESS (B):	_				
DATE SIGNED BEFORE NOTARY. November 9, 2018 DATE SIGNED BEFORE NOTARY. November 9, 2018					
DATE STONED OCFURE NUMBER: DATE STONED OCFURE NUMBER:	—				
NOTARY VERFICATION SECTION:					
STATE OF Tilinois					
) SS DATE NOTARIZED: NOVEMBER 9, 2018	_				
COUNTY OF Cook)					
I, the undersigned, a notary public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that the owner or AFFIX NOTARY STAMP BELOW	<u>N:</u>				
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 nurrouses therein set forth. CINDY CANNIZZARO					
The same variation place one par passes constrained and the constr					
PRINT NOTARY NAMECINDY CANNIZZA SHONATURE OF NOTARY: Company Public - State of Illinois My Commission Expires Apr 15, 202	,				
My Commission Expires Apr 15, 202) 				
	-				

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For APN/Parcel ID(s): 05-33-301-063-1016 For Tax Map ID(s): 05-33-301-063-1016

UNIT NO "2G" AS DELINEATED ON PLAT OF SURVEY OF THE FOLLOWING DESCRIBED PARCEL OF REAL ESTATE (HEREINAFTER REFERRED TO AS PARCEL): LOT 1 IN MATTHIES RESUBDIVISION OF LOT 1 (EXCEPT THOSE PARTS THEREOF TAKEN FOR PUBLIC STREET PURPOSES) IN OWNER'S DIVISION OF THAT PART OF LOT 39 OF THE COUNTY CLERKS DIVISION OF THE WEST 1/2 OF THE FRACTIONAL SECTION 33, TOWNSHIP 43 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN LYING WEST OF RIDGE AVENUE IN COOK COUNTY, ILLINOIS WHICH PLAT OF SURVEY IS ATTACHED AS EXHIBIT "C" TO DECLARATION OF CONDOMINIUM MADE BY NATIONAL BOULEVARD BANK OF CHICAGO, A NATIONAL BANKING ASSOCIATION, AS TRUSTEE UNDER TRUST AGREEMENT DATED APRIL 17, 1970 KNOWN AS TRUST NUMBER 3426 RECORDED IN THE OFFICE OF THE RECORDER OF DEEDS OF COOK COUNTY, ILLINOIS AS DOCUMENT 22495754 AND AS AMENDED FROM TIME TO TIME, TOGETHER WITH ITS UNDIVIOUS PERCENTAGE INTEREST IN SAID PARCEL (EXCEPTING DECL OF COUNTY CIEPTS OFFICE FROM SAID PARCEL ALL THE PROPERTY AND SPACE COMPRISING ALL THE UNITS THEREOF AS DEFINED AND SET FORTH IN SAID DECLARATION AND SURVEY) IN COOK COUNTY, ILLINOIS.