THIS INSTRUMENT WAS PREPARED BY: Doc # 19123470266 Fee \$42.25 RHSP FEE: \$9.06 RPRF FEE: \$1.06 EDWARD M. MODDY COOK COUNTY RECORDER OF DEEDS DATE: 05/03/2019 12:22 PH PG: 1 OF 2 NAME & ADDRESS OF PROPERTY OWNER: Charles & Alenda Coldes TRSD Richard Coldes THIS TRANSFER ON DEATH INSTRUMENT (TOD) PURSUANT TO \$755 ILCS 27/IET SED THIS TRANSFER ON DEATH INSTRUMENT (hereinafter referred to as a "TOD!"), which was completed and signed before a notary public on the following date May 3-20/19
NAME & ADDRESS OF PROPERTY OWNER: Charles & Alenda Colder ITS30 Ridgewood Dr. INIS TRANSFER ON DEATH INSTRUMENT (TODI) PURSUANT TO 8 755 ILCS 27/1 ET SED. THIS TRANSFER ON DEATH INSTRUMENT (hereinafter referred to as a "TODI"), which was completed and signed before a notary public on the following date: May 3—30/9 by the property owner or owners, whose name is or are: Charles & Clurkla Colomic date of the city of
NAME & ADDRESS OF PROPERTY OWNER: Charles & Alenda Colder TASSO Ridgewood Dr. Charles for the company of the city of: Alere of the city of the city of: Alere of the city of th
NAME & ADDRESS OF PROPERTY OWNER: Charles & Stenda Colder 17830 Riclawood Dr. Charles & Lenda Colder 17830 Riclawood Dr. Charles & Lenda Colder ILLINOIS RESIDENTIALAR ASSER ON DEATH INSTRUMENT (TOD) PURSUANT TO 8 755 ILCS 27/IET SED. THIS TRANSFER ON DEATH INSTRUMENT (hereinafter referred to as a "TOD!"), which was completed and signed before a notary public on the following date: May 3—3019
NAME & ADDRESS OF PROPERTY OWNER: Charles & Alenda Colder 17830 Riclawood Dr. Charles F. L. 60429 ILLINOIS RESIDENTIAL RE INSFER ON DEATH INSTRUMENT (TODI) PURSUANT TO \$755 ICS 27/IET SED. THIS TRANSFER ON DEATH INSTRUMENT (Gereinafter referred to as a "TODI"), which was completed and signed before a notary public on the following date: May 3—3019
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in the city of:
in the city of: Acelerate
in the city of: \(\lambda \text{Zef Cr.esf} \) and sounty of: \(\lambda \text{OO/K} \) in the state of: \(\lambda \text{VOJ} \) 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-reterenced 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 duty occorded DEED or other CONVEYANCE INSTRUMENT which was recorded on the date of: with the proper County Agency in the in the State of Illinois. Furthermore, this TOOI is intended to transfer the following real property:
with a zip code of: 60429 while being it sound mind and disposing memory, do now hereby make, declare and publish this TODI, stating and attesting to the following. That the above-reterenced 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 occorded DEED or other CONVEYANCE INSTRUMENT which was recorded on the date of: as document number: with the proper County Agency in the County of: in the State of Illinois. Furthermore, this TOOI is intended to transfer the following real property:
publish this TODI , stating and attesting to the following. That the abov 3-ret 3-renced 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 dely 3-scorded DEED or other CONVEYANCE INSTRUMENT which was recorded on the date of:
the residential (which must be between 1 – 4 units) real estate, under a duly escorded DEED or other CONVEYANCE INSTRUMENT which was recorded on the date of:
the residential (which must be between 1 – 4 units) real estate, under a duly escorded DEED or other CONVEYANCE INSTRUMENT which was recorded on the date of: as document number: in the State of Illinois. Furthermore, this Tabl is intended to transfer the following real property:
recorded on the date of: as document number: with the proper County Agency in the County of: in the State of Illinois. Furthermore, this Tull is intended to transfer the following real property:
County of: in the State of Illinois. Furthermore, this TuUI is intended to transfer the following real property:
LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN BELGY -OR- SEE ATTACHED
LOT 130 IN HILLCREST SUBDIVISION 2ND ADDITION, BEING A SUBDIVISION OF
PART OF THE SOUTH 1/2 OF THE NORTHWEST 1/4 AND PART OF THE WEST 60 ACRES OF THE WEST 1/2 OF THE SOUTHWEST 1/4, ALL IN SECTION 36, TOWNSHIP 36
NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY,
ILLINOIS.
PROPERTY IDENTIFICATION NUMBER(PIN): 2 2 - 3 6 - 3 1 1 - 0 0 3 - 0 0 0 0
COMMONLY REFERRED TO ADDRESS: 17830 Ridgewood Dr.
Hazel (Ned TL 61429
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 <u>CONVEY</u> and <u>TRANSFER</u> , effective upon the death of the above-named <u>OWNER</u> , or last to die of the <u>OWNERS</u> , the above-
described real property to the named BENEFICIARY or BENEFICIARIES on the following page in the specified TENANCY TYPE if multiple BENEFICIARIES .

THE REPORT OF THE PARTY OF THE

SPECIAL NOTICE: This form is provided compliments of EDWARD M. MOODY, 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 PURSU		
As referenced on the foregoing page, the aforementioned <u>OWNER</u> or <u>OWNERS</u> do above-named <u>OWNER</u> , or last to die of the <u>OWNERS</u> , the above-described real pro TENANCY TYPE if multiple <u>BENEFICIARIES</u> are listed. Additionally, in the event the	perty to the named <u>BENEFICIARY</u> or <u>BENEFICIARIES</u> in the specified	
the following CONTINGENCY BENEFICIARY or BENEFICIARIES should receive the in	nterest outlined in this instrument, in the designated TENANCY TYPE:	
BENEFICIARY (A) BENEFICIARY (B)	BENEFICIARY (C) BENEFICIARY (D)	
Lisa Jones Victor Bolden	Charles Colden Jr.	
<u>daughter</u> <u>Son</u>	Sun,	
If more <u>BENEFICIARIES</u> are Jesired, please attach separate sheet of paper with the Also, if there are multiple beneficiaries, the OWNER or OWNER desires that the trace of the CONTRACT CONTRACT OF SURVIVORSH	nsfer be to those BENEFICIARIES IN THE FULLDWING TENANCY TYPE:	
In the event all of the above-referenced EENETICIARIES pre-decease the owner/CONTINGENCY BENEFICIARY (A) CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C) CONTINGENCY BENEFICIARY (U)	
Jasmine Janes Juylin Best	Victor bolden In	
grandchild great g. thild	grand child	
I, or we, the SOLE OWNERS hereby swear and affirm that the foregoing wir nes v	ere made as my or our free and voluntary act for the purposes set forth.	
PRINT DWNER NAME (A): Osenda bolden	TRIMT OWNER NAME (B):	
SIGNATURE OF DWNER (A): <u>Glenda Golden</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 JUNYERS, 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>Ermoni</u> Best	PRINT WITNESS NAME (B): Elica Cest	
SIGNATURE OF WITNESS (A): Exmuni Pest	SIGNATURE OF WITNESS (B): Elicia, Bost	
DATE SIGNED BEFORE NOTARY:	DATE SIGNED BEFORE NDTARY:	
NOTARY VERFICATION SECTION:		
STATE OF	DATE NOTARIZED: April 29, 2019	
COUNTY OF		
), the undersigned, a notary public in and for said County, in the State aforesaid, DO HER owners, and witnesses, personally known to me to be the same persons whose names ar		
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. REGINA M DUPEE Official Seal		
PRINT NOTARY NAME: Regina M. Diver SIGNATURE OF NOTARY Legisla My Commission Expires Mar 10, 2020		