THIS INSTRUMENT WAS PREPARED BY CIAL CO LuSandra Skinner Doc# 1914447204 Fee \$88.00 RHSP FEE: \$9.00 RPRF FEE: \$1.00 NAME & ADDRESS OF PROPERTY OWNER: EDWARD M. MOODY COOK COUNTY RECORDER OF DEEDS DATE: 05/24/2019 10:46 AM PG: 1 OF 2 THIS TRANSFER ON DEATH INSTRUMENT (hereinafter referred to as a "TODI"), which was completed and signed before a notary public on the , by the property owner or owners, whose name is or are: La Sandia Skinn ex and currently live at the street address of: 1536 N. Lavami e in the city of: Chicago , while Leing of sound mind and disposing memory, do now hereby make, declare and with a zip code of: 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: March 4, 2016 as document number: 1606751003 with the proper County Agency in the in the State of Illinois. Furthermore, this 7001 is intended to transfer the following real property: Cook County of: CHECK WHICH APPLIES - WRITTEN BELOW -OR- SEE ATTACHED **LEGAL DESCRIPTION:** in block 2 in Circuit Court partition of the East 15.08 1/2 of the Sortheast 1/4 North Cange 14 East JILINOIS PROPERTY IDENTIFICATION NUMBER(PIN): 20-03-427-027-0000 COMMONLY REFERRED TO ADDRESS: 4632 S Evans Chicago IL 60653

įĮ

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.

## INOFFICIAI

TRANSFER ON DEATH INSTRUMENT - PAGE 2 (THIS INSTRUMENT IS EXEMPT PURSUANT TO 8 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 **DWNER**, or last to die of the **DWNERS**, 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: BENEFICIARY (C) BENEFICIARY (D) BENEFICIARY (B) BENEFICIARY (A) 1536 N. Laramie Chicago, IL 60651

If more BENEFICIARIES and 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 DWNER or DWNER 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 SEXEFICIARIES pre-decease the owner/owners, the following CONTINGENCY BENEFICIARIES shall replace them. CONTINGENCY BENEFICIARY (D) CONTINGENCY BENEFICIARY (C) CINYINGENCY BENEFICIARY (B) CONTINGENCY BENEFICIARY (A) Lawrence Skinner

1536 IV. Lavamise

Chicago FL 60651

I, or we, the SOLE OWNERS hereby swear and affirm that the foregoing wisnes were made as my or our free and voluntary act for the purposes set forth. PRINT DWNER NAME (A): La Sandin Skinner PRINT OWNER NAME (B): SIGNATIVRE OF OWNER (B): SIGNATURE OF DWNER (A): DATE SIGNEL BEFUCE NOTARY: DATE SIGNED BEFORE NOTAPH: Musi So WITNESS DECLARATION - THIS SECTION IS TO BE ATTESTED TO AND SIGNED IN THE PRESENCE OF THE OWNER, ALL WITNESSES, AND NOTARY PUBLIC: We, the undersigned witnesses, hereby certify that the foregoing TODI was executed and signed on the date of ferenced above, and signed by the owner or owners as her, his, or their voluntary TDDI 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 own 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 with PRINT WITNESS NAME (A): Coleman Brown PRINT WITNESS NAME (B): DEFFICE SIGNATURE OF WITNESS (B): SIGNATURE OF WITNESS (A): (100. DATE SIGNED BEFORE NOTARY: 5/22/2019 DATE SIGNED BEFORE NOTARY: 422/2019 **NOTARY VERFICATION SECTION:** STATE OF DATE NOTARIZEO: COUNTY OF

1, 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:

DE SIGNATURE OF NOTARY:

AFFIX NOTARY STAMP BELOW:

