THIS INSTRUMENT WAS PREPARED BY: 1935817106 Fee \$88.00 RHSP FEE: \$9.00 RPRF FEE: \$1.00 NAME & ADDRESS OF PROPERTY OWNER: EDHARD M. MOODY COOK COUNTY RECORDER OF DEEDS DATE: 12/24/2019 01:49 PM PG: 1 OF 2 THIS TRANSFER ON DEATH INSTRUMENT (pereinafter 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: <u>Brewly Braco</u>ll following date: and currently live at the street address of: 632% Appre Hice Lowe LESTER and country of: <u>COOK COUNTY</u>, in the state of: <u>IC</u> in the city of: MATT450W_, with a zip code of: 60 443 , 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: $\frac{5}{25}$ as document number: $\frac{04116032356}{25}$ with the proper County Agency in the in the State of Illinois. Furthermore, this TOS' is intended to transfer the following real property: County of: Coo K CHECK WHICH APPLIES - WRITTEN BELUW | - OR- SEE ATTACHED TIFICATION NUMBER(PIN): 3 1 - 17 -COMMONLY REFERRED TO ADDRESS: 6328 APPLE HILL LA MATTESON, IL 60443 Finally, the owner, or owners, while also being of competent mind and capacity, while waiving and releasing all rights under the Homestead Exemption lews 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 OWNERS, the above-named OWNER. described real property to the named **BENEFICIARY** or **BENEFICIARIES** on the following page in the specified **TENANCY TYPE** if multiple **BENEFICIARIES**: SPENIAL NOTICE: This form is provided compliments of KAREN A. YARBROUGH, 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 ATTURNEY OR LICENSED ESTATE PLANNING PROFESSIONAL if you have additional questions, comments or concerns regarding how to complete this form, as the GOOK COUNTY RECORDER OF DEEDS OFFICE STAFF MAY NOT assist you with the preparation of this, or any, legal document.

TRANSFER ON DEATH INSTRUMENT - PAGE 2 (THIS INSTRUMENT IS EXEMPT PURSUANT TO 8 35 ILGS 200/31-45, PARA, IL REAL ESTATE TRANSFER TAX LAW As referenced on the foregoing page, the aforementioned <u>OWNER</u> or <u>OWNERS</u> do now hereby <u>CONVEY</u> and <u>TRANSFER</u>, 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 DWNER or DWNERS. the following CONTINGENCY BENEFCIARY or BENEFICIARIES should receive the interest outlined in this instrument, in the designated TENANCY TYPE: BENEFICIARY (D) BENEFICIARY (C) BENEFICIARY (B) BENEFICIARY (A) 109 moonlight R MATIESON, IL 60493 MATTIESON, IL 6049 If more BENEFICIARIES are 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 **BENCYCARIES** pre-decease the owner/owners, the following **CONTINGENCY BENEFICIARIES** shall replace them. CONTINGENCY BENEFICIARY (D) CONTINGENCY BENEFICIARY (C) CONTINGENCY BENEFICIARY (B) CONTINGENCY BENEFICIARY (A) 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): SIGNATURE OF DWNER (B) SIGNATURE OF OWNER (A): 🛹 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/CAPERS, ALL WITNESSES, AND NOTARY PUBLIC: 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 TOOI 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 Coleman PRINT WITNESS NAME (B): PRINT WITNESS NAME (A): Madelin SIGNATURE OF WITNESS (B): DATE SIGNED BEFORE NOTARY: 8-7-DATE SIGNED BEFORE NOTARY: ${\cal X}$ NOTARY VERFIGATION SECTION: DATE NOTARIZED: Sugust 07-20. AFFIX NOTARY STAMP BELOW: 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 OFFICIAL SEAL free and voluntary act, for the uses and purposes therein set forth. LINDA C. RICHARD-BEY Lima C. Richard-Bey SIGNATURE OF NOTARY **NOTARY PUBLIC - STATE OF ILLINOIS** PRINT NOTARY NAME: