THIS INSTRUMENT WAS PREPARED BY: FFICIAL				
Ethel Williams	*2028040005*			
12819 S. LoweArc.	Doc# 2028040005 Fee \$39.00			
Chicago, IL. 60628	NSP FEE:\$9.00 RPRF FEE: \$1.00 EDHARD M. MOODY			
NAME & ADDRESS OF PROPERTY OWNER:	COOK COUNTY RECORDER OF DEEDS			
Kenny + Ethel Williams	DATE: 10/06/2020 10:45 AM PG: 1 OF 2			
12819 S. Lowe Ave.	<u>-</u> - <u>-</u>			
C;h,cago, J.L. 60628	appear or in more .			
ILLINDIS RESIDENTIO TRANSFER ON DEATH INSTRUMENT (T	ODI) PURSUANT TO \$.755 ILCS 27/1 ET SEQ.			
THIS TRANSFER ON DEATH INSTITUTE (hereinafter referred to as a "TODI"), w	hich was completed and signed before a notary public on the			
following date: September 12 2020 by the property owner	or owners, whose name is or are: Kenny 4			
Ethel Williams and currently live at the stre	eet address of: 12819 S. Lowe Ave.			
	in the state of: TLL nois			
with a zip code of: 60627 . while coing of sound mind and	d disposing memory, do now hereby make, declare and			
publish this TODI, stating and attesting to the following. That it is above-referenced property owner or owners, is or are, the SOLE owner(s) of				
the residential (which must be between $1-4\mathrm{units}$ ) real estate, under $7\mathrm{ucly}$ recor				
recorded on the date of: $11-8-1979$ as document number: $22.99$	2 4 0 0 with the proper County Agency in the			
	TSDI is intended to transfer the following real property:			
LEGAL DESCRIPTION: CHECK WHICH APPLIES – WRITTEN BELOW 🔀 -OR- SEE ATTACHED 💢				
Lot 38 and the North 10 feet of lot 37 in Block 4 in New Roseland, a				
Subdivision of part of fractional Section 33, North of Indian Boundary Line and Part				
of fractional Sections 28433, South of Indiant	boundary line in Jourship 37 North,			
Range 14, East of the Third Principal Meridian, Plat di				
PROPERTY IDENTIFICATION NUMBER(PIN): 2 5 - 33 - 1 04 - 03 P-0000				
COMMONLY REFERRED TO ADDRESS: 12819 S.	Lowe Ave			
Chicago,	工人, 6062 8			
Finally, the owner, or owners, while also being of competent mind and capacity, while wait	ring and releasing all rights under the Homestead Exemption laws			
of the State of II, do now hereby CUNVEY and TRANSFER, effective upon the death of the				
described real property to the named <u>BENEFICIARY</u> or <u>BENEFICIARIES</u> on the following p	age in the specified <u>TENANCY TYPE</u> if multiple <u>BENEFICIARIES.</u>			
SPECIALNOTICE. This form is provided compliments of KAREN A. YARBROUGH, COOK C  ADVICE in any way, shape or form. Furthermore, it is provided WITHOUT any TITLE E  CONTACT AN ATTORNEY OR LICENSED ESTATE PLANNING PROFESSIONAL if you have complete this form, as the COOK COUNTY RECORDER OF DEEDS OFFICE STAFF MAY N	XAMINATION or REVIEW of your individual estate plan. <u>PLEASE</u> re additional questions, comments or concerns regarding how to			
Sommer Butters in	TO SERVIN			

## **UNOFFICIAL COPY**

	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	e aforementioned <u>OWNER</u> or <u>OWNERS</u> do	now hereby <u>CONVEY</u> and <u>TRANSFER</u> , e	ffective 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 <u>BENEFICIARY</u> or <u>BENEFICIARIES</u> in the specified <u>TENANCY TYPE if multiple <u>BENEFICIARIES</u> are listed. Additionally, in the event the <u>BENEFICIARY</u> or <u>BENEFICIARIES</u> pre-decease the <u>OWNER</u> or <u>OWNERS</u>.</u>				
TENANCY TYPE if multiple BENEFICIARII	ES are listed. Additionally, in the event the	e <u>BENEFICIARY</u> or <u>BENEFICIARIES</u> pre-	decease the <u>wwith</u> or <u>wwiths</u> ,	
	RY or <b>BENEFICIARIES</b> should receive the			
<u>BENEFICIARY (A)</u>	<u>BENEFICIARY (B)</u>	BENEFICIARY (C)	<u>BENEFICIARY (D)</u>	
Kenneth Williams		1	· · · · · · · · · · · · · · · · · · ·	
12819 S. Love Ave			·	
Chicago, IL. 60628				
If more <b>BENÉFICIARIES</b> are desired, plea	ase attach separate sheet of paper with t	the full names and addresses of the des	red additional <b>BENEFICIANIES</b> .	
Also, if there are multiple beneficiaries to CHOOSE ONE (ONLY): JOINT TENANTS	the OWNER or OWNER desires that the tra R COMMON W/ RIGHT OF SURVIVORSH	ansfer be to those <u>Beneficiaries in th</u> IPOR- Tenants in Common w	IE FOLLOWING TENANCY TYPE:  /O RIGHT OF SURVIVORSHIP	
F d (6-f) 1 - 1 1	BENEFIC: 'RIES pre-decease the owner/	Surgery the following PONTINGENEY R	ENESCIADIES chall realers them	
CONTINGENCY BENEFICIARY (A)	CONTINE MES PRE-DECESSE THE DWIEN	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)	
Brianna Williams	Kiera Williams	Myera Williams	Kendrick Millians	
14531 S. Wallace	458 Tamarack	458 Tamaract	458 Tamaracc	
Riverdale, IL. 60827	Park Forest, IL	Park Forest, IL	Park Forest, IL.	
I, or we, the SOLE OWNERS hereby swee	ar and affirm that the foregoing wishe. w	ere made as my or our free and volunta	ry act for the purposes set forth.	
PRINT DWNER NAME (A): Len	14 W? 1 (24MS	PRINT OWNER NAME (B): E+h.e	1. Williams	
SIGNATURE OF OWNER (A): Ken	my Welliams	SIGNATURE (F GWNER (B): Ethe	1 Williams	
DATE/SIGNED BEFORE NOTARY: 9-	16-2030	DATE SIGNED BEFORE MUTARY: Se p	ot. 16 2020	
WITNESS DECLARATION - THIS SECTION IS TO BE ATTESTED TO AND SIGNED IN THE PRESENCE OF THE OWNER/UW.CRS, ALL WITNESSES, AND NOTARY PUBLIC:				
We, the undersigned witnesses, hereby certify that the foregoing TOOI was executed and signed on the date references a bove, 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				
owners as her, his, or their voluntary TO	Ol in our presence, at the request of her, I	him or them, and while also in the presen	one another. We also do now	
hereby swear and affirm that we are sign	ning our names to this instrument with the ree from any undue influence or coercion	to any narties, including us as witnesse:	AMD 12, Maz al. Mele' er fus fillis m	
signing or sound mind and memory, and i	LEE ILDINGHY MICHE WHITEHER AL PRES CION	n) mi) hm siest mounting on an impresent		
PRINT WITNESS NAME (A): Glar)	ia McDowell	PRINT WITNESS NAME (B):	IN MEEUES	
SIGNATURE OF WITNESS (A):	- Mc Nawel	SIGNATURE OF WITNESS (8):	sin Rever	
DATE SIGNED BEFORE NOTARY	inder 16, 2020	DATE SIGNED BEFORE NOTABLE	timper 16, 2020	
NOTARY VERFICATION SECTION:				
STATE OF Sellingus	)		to 1.11 DADA	
COUNTY OF CASK	) 22	DATE NOTARIZED:	MILLIN 14,0000	
ъшинт иг <u> </u>		,		

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: ELAYNE & WARM SIGNATURE OF NOTARY BLAYME

AFFIX NOTARY STAMP BELOW:

OFFICIAL SEAL **ELAYNE E. WEATHERSBY** Notary Public - State of Illinois My Commission Expires 6/22/2021