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THIS INSTRUMENT WAS PREPARED BY:

Lillian White
5414 S Aberdeen
CHICAGO, IL 60609

NAME & ADDRESS OF PROPERTY OWNER:

Lillian White
5414 S Aberdeen
CHICAGO, IL 60609



Doc# 2182729058 Fee \$39.00

RHSP FEE: \$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 01/27/2021 03:19 PM PG: 1 OF 3

ILLINOIS RESIDENTIAL TRANSFER ON DEATH INSTRUMENT (TODI) PURSUANT TO § 755 ILCS 27/1 ET SEQ.

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

following date: 9/29/20, by the property owner or owners, whose name is or are: Lillian White, and currently live at the street address of: 5414 S Aberdeen in the city of: CHICAGO and county of: COOK, in the state of: IL with a zip code of: 60609, 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: _____ as document number: _____ with the proper County Agency in the County of: _____ in the State of Illinois. Furthermore, this TODI is intended to transfer the following real property:

LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN BELOW -OR- SEE ATTACHED

PROPERTY IDENTIFICATION NUMBER(PIN): 20-08-424-0170000

COMMONLY REFERRED TO ADDRESS: 5414 S Aberdeen
CHICAGO, IL 60609

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 Il, do now hereby **CONVEY** and **TRANSFER**, 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** on the following page in the specified **TENANCY TYPE** if multiple **BENEFICIARIES**.

SPECIAL NOTICE: This form is provided compliments of **KAREN A. YARBROUGH, 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 PURSUANT TO B 35 ILCS 200/31-45, PARA. 1L 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 **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 **OWNERS**, 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 (D)
Troy A. White 148 Ash St. Bolingbrook, IL	Teresa Lott 2860 Londonderry Dr. Sacramento, CA 95827	Emmett E. White 2414 S. Aberdeen Chicago, IL 60616	Seth T. White 4006 Tim Allen Ct. Houston, TX 77014

If more **BENEFICIARIES** are 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 **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 **BENEFICIARIES** pre-decease the owner/owners, the following **CONTINGENCY BENEFICIARIES** shall replace them.

CONTINGENCY BENEFICIARY (A)	CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)
_____	_____	_____	_____
_____	_____	_____	_____

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): Lillian White PRINT OWNER NAME (B): _____
SIGNATURE OF OWNER (A): Lillian White SIGNATURE OF OWNER (B): _____
DATE SIGNED BEFORE NOTARY: 9-29-20 DATE SIGNED BEFORE NOTARY: _____

WITNESS DECLARATION - THIS SECTION IS TO BE ATTESTED TO AND SIGNED IN THE PRESENCE OF THE OWNER/OWNERS, 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.

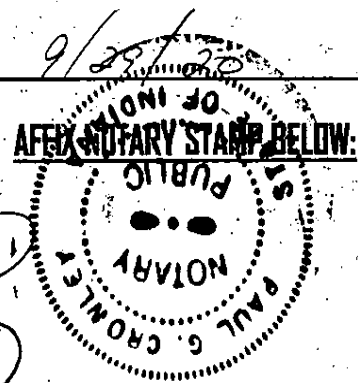
PRINT WITNESS NAME (A): Bonnie Brokman PRINT WITNESS NAME (B): _____
SIGNATURE OF WITNESS (A): Bonnie Brokman SIGNATURE OF WITNESS (B): _____
DATE SIGNED BEFORE NOTARY: 9/29/2020 DATE SIGNED BEFORE NOTARY: _____

NOTARY VERIFICATION SECTION:

STATE OF INDIANA)
COUNTY OF St. Joseph) SS
DATE NOTARIZED: 9/29/20

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: PAUL CROWLEY SIGNATURE OF NOTARY: [Signature]



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DESCRIPTION OF LAND

— The South Twelve (12) feet of LOT TWENTY EIGHT----- (28) —
 — LOT TWENTY NINE (except the South Four (4) feet thereof)----- (29) —

— In Block Six (6), in the Subdivision of Blocks 5 and 6 in F. Gaylord's Subdivision of the Southwest Quarter ($\frac{1}{4}$) of the Southeast Quarter ($\frac{1}{4}$) of Section 8, Township 38 North, Range 14, East of the Third Principal Meridian. —

Cook County Clerk's Office