

UNOFFICIAL COPY

THIS INSTRUMENT WAS PREPARED BY:

APRIL BRUCE
7338 S CALUMET
CHICAGO, IL 60619



Doc# 2111119085 Fee \$39.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 04/21/2021 04:12 PM PG: 1 OF 3

NAME & ADDRESS OF PROPERTY OWNER:

APRIL BRUCE
7338 S CALUMET
CHICAGO, IL 60619

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: 3/27/2021, by the property owner or owners, whose name is or are: APRIL BRUCE

and currently live at the street address of: 7338 S. CALUMET

in the city of: CHICAGO, and county of: COOK, in the state of: ILLINOIS

with a zip code of: 60619, 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

7338 S CALUMET CHICAGO, IL 60619

PROPERTY IDENTIFICATION NUMBER(PIN): 20-27-116-028-0000

COMMONLY REFERRED TO ADDRESS: _____

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 CLERK 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 CLERK'S OFFICE STAFF MAY NOT** assist you with the preparation of this, or any, legal document.

UNOFFICIAL COPY

TRANSFER ON DEATH INSTRUMENT - PAGE 2 (THIS INSTRUMENT IS EXEMPT PURSUANT TO § 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**:

<u>BENEFICIARY (A)</u>	<u>BENEFICIARY (B)</u>	<u>BENEFICIARY (C)</u>	<u>BENEFICIARY (D)</u>
Ashton Foster	_____	_____	_____
_____	_____	_____	_____

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.

<u>CONTINGENCY BENEFICIARY (A)</u>	<u>CONTINGENCY BENEFICIARY (B)</u>	<u>CONTINGENCY BENEFICIARY (C)</u>	<u>CONTINGENCY BENEFICIARY (D)</u>
Aamina K Fields	_____	_____	_____
_____	_____	_____	_____

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): April Bruce PRINT OWNER NAME (B): _____
 SIGNATURE OF OWNER (A): [Signature] SIGNATURE OF OWNER (B): _____
 DATE SIGNED BEFORE NOTARY: 3-27-2021 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): Joseph H. Poe Sr PRINT WITNESS NAME (B): Roosevelt Baldwin
 SIGNATURE OF WITNESS (A): [Signature] SIGNATURE OF WITNESS (B): [Signature]
 DATE SIGNED BEFORE NOTARY: 3-27-2021 DATE SIGNED BEFORE NOTARY: 3-27-2021

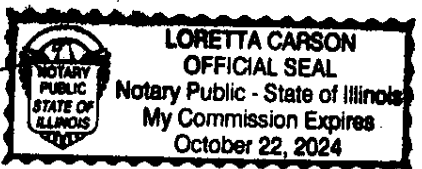
NOTARY VERIFICATION SECTION:

STATE OF ILLINOIS)
) SS
 COUNTY OF LAKE)
 DATE NOTARIZED: March 27, 2021

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: Loretta Carson SIGNATURE OF NOTARY: [Signature]

AFFIX NOTARY STAMP BELOW:



UNOFFICIAL COPY

Office of the Cook County Clerk

Map Department Legal Description Records

P.I.N. Number: 20271160280000

The legal description card(s) below is prepared in a format used for official county record-keeping, and can be used by the Cook County Recorder's Office to access their tract books.

If you need assistance interpreting this description, please obtain a copy of our instruction sheet "How to Read a Legal Description Card", available from the counter clerk or at our website www.cookcountyclerk.com

Please verify the Property Identification Number or P.I.N. (also known as the "Permanent Real Estate Index Number). If this is not the item you requested, please notify the clerk.

202711602870012390501										
AREA	SUB-AREA	BLOCK	PARCEL	CODE	WARRANT	ITEM	ALP	FIRST SUFFIX	SECOND SUFFIX	THIRD SUFFIX

OFFICE OF THE CLERK OF COOK COUNTY, ILLINOIS
PERMANENT REAL ESTATE INDEX NUMBER AND LEGAL DESCRIPTION

VOLUME [REDACTED]
266

AREA	SUB-AREA	BLOCK	PARCEL	TAX CODE	SEC.	TOWNSHIP	RANGE	LOT	SUB-LOT	LOT	BLOCK
20	27	116	28	7001	27	38	14			4	8

PRESCOTTS SUB S 34FT

AREA	SUB-AREA	BLOCK	PARCEL	CODE	WAR-RANT	ITEM	FIRST SUFFIX	SECOND SUFFIX	THIRD SUFFIX	FOURTH SUFFIX
0	0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9