•				
	THIS INSTRUMENT WAS PREPARED BY: FICIAL COP			
	Catherine GRAFIN MALONE	10N€ Doc# 2114422025 Fee \$39.00		
	4/3/W93'dP1 2W			
	NAIC LOUIS TO GOVES	RHSP FEE: \$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH		
	NAME & ADDRESS OF PROPERTY OWNER:	COOK COUNTY CLERK DATE: 05/24/2021 10:34 AM	PG: 1 OF 4	
(atherna briffin-MALAND		2 41 4	
	4/3/1N93 rd PLZW			
	12AK LAWN IL 60453			
			<u> 1495 - AT 445 . 14 45</u>	
	ILLINOIS RESID en tial transfer on death instrument (todi) pui		27/1 ET SEQ	
	THIS TRANSFER ON DEATH ASTRUMENT (hereinafter referred to as a "TODI"), which was c	_ ,	/	
	following date: 5/24/20/ by the property owner or owners			
	Maline at the street address		<u> </u>	
	in the city of: OAK Lawn and county of: COOK	, in the state of:		
	with a zip code of: 60453 while being of sound mind and disposing	memory, do now hereby make,	declare and	
	publish this TOOI, stating and attesting to the following. In at the above-referenced property (wner or owners, is or are, the	SOLE owner(s) o	
	the residential (which must be between 1 – 4 units) real estate, under a duly recorded DEED o	r other CONVEYANCE INSTRU	MENT which was	
	recorded on the date of: 4/16/202/ as document number: 2/09/5702	with the proper Count	y Agency in the	
	County of: in the State of Illinois. Furthermore, this TODI is int		•	
	LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITGEN BELI	OWOR- SEE AT	TACHED 🕏	
	& E.F. #HTAched		. -	
		10		
		0		
	PROPERTY IDENTIFICATION NUMBER(PIN): / 6 - / 0 - / 0		- -	
	COMMONLY REFERRED TO ADDRESS: 4657 W Supera	our Chica	97 IL	
	60644	/		
	finally, the owner, or owners, while also being of competent mind and capacity, while waiving and release	sing all rights under the Homesti	ead Exemption laws	
	of the State of II, do now hereby CONVEY and TRANSFER , effective upon the death of the above-name	DWNER, or last to die of the DW	NERS, the above-	
	described real property to the named <u>BENEFICIARY</u> or <u>BENEFICIARIES</u> on the following page in the sp	ecified <u>TENANCY TYPE</u> if multiple	BENEFICIARIES.	
	SPECIAL NOTICE: This form is provided compliments of EDWARD M. MODDY, COOK COUNTY RECORD ADVICE in any way, shape or form: Furthermore, it is provided WITHOUT any TITLE EXAMINATION CONTACT AN ATTORNEY OR LICENSED ESTATE PLANNING PROFESSIONAL if you have additional complete this form, as the COOK COUNTY RECORDER OF DEEDS OFFICE STAFF MAY NOT assist you	or REVIEW of your individual est juestions, comments or concerns	ate plan. <u>PLEASE</u> regarding how to	

TRANSFER ON DEATH INSTRUMENT - PAGE 2 (THIS INSTRUMENT IS EXEMPT PURSUANT TO \$ 35 HCS 2007/31-45 PARA H REAL ESTATE TRANSFER TAY LAW

1:	2 × 2					
\$ *	ER, effective upon the death of the or BENEFICIARIES in the specified pre-decease the <u>OWNER</u> or <u>OWNERS</u> , in the designated TENANCY TYPE:					
	BENEFICIARY (A)	BENEFICIARY (B)	BENEFICIARY (C)	BENEFICIARY (D)		
E	BONY D GRIFFINS					
•	<i>I</i> .	· .				
<u> </u>	If more BENEFICIAPIES are desired ple	ease attach separate sheet of paper with the OWNER or OWNER desires that the tr	the full names and addresses of the r	desired additional BENEFICIARIES.		
٠	CHOUSE UNE (UNLY): JUINT TENANTS	S IN COMMON W/ RIGHT OF SURVIVORSI	SHIPOR- TENANTS IN COMMON	N W/O RIGHT OF SURVIVORSHIP		
	In the event all of the above-raise enced CONTINGENCY BENEFICIARY (A)	BENEFICIARIES pre-decease the owner CONTINGENCY BENEFICIARY (B)	owners, the following <u>CONTINGENCY</u> <u>CONTINGENCY BENEFICIARY (C)</u>	Y BENEFICIARIES shall replace them. CONTINGENCY BENEFICIARY (D)		
		0,,,		··. · ·		
		<u> </u>				
		0/				
		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): <u>C'Athern</u>	10 log 18ton May 19 E	PRINT DWNER NAME (B).			
	SIGNATURE OF OWNER (A) Selficial	Loff- Malare	SIGNATURE OF OWNER (B):			
	DATE SIGNED BEFORE NOTARY: 5	24/ 202/	DATE GIGNED BEFORE NOTARY:	<u> </u>		
	WITNESS DECLARATION - THIS SECTION We the undersinged witnesses, hereby c	I IS TO BE ATTESTED TO AND SIGNED IN THE certify that the foregoing TODI was execute	E PRESENCE OF THE CHIPER/OWNERS,	ALL WITNESSES, AND NOTARY PUBLIC:		
	owners as her, his, or their voluntary 100 hereby swear and affirm that we are sign	cercity that the threyong tool was execute 101 in our presence, at the request of her, I pling our names to this instrument with the free from any undue influence or coercion	, him or them, and while əlsə in the pres ie belief and knowledge that thewi.r i	sence of one another. We also do now or owners, was or were at the time of		
	SIGNATURE OF WITNESS (A) Targe	Lovers - Lovers	SIGNATURE OF WITNESS (8): 1	and Breus		
	DATE SIGNED BEFORE NOTARY:					
	STATE OF Illinois	NOTARY VERFICAT				
	STATE OF Thinos's Cook)))	DATE NOTARIZED:	05/24/2021		
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						
•	instrument, appeared before me on the below free and voluntary act, for the uses and purpoper PRINT NOTARY NAME:	pases therein set forth.	oregoing instrument as their	JON C KILBY Official Seal		
	PRINT NOTARY NAME:	SIGNATURE OF NOTARY: <	for a lawy	Notary Public - State of Illinois		

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COOK COUNTY CLERK NOTICE OF DEATH AFFIDAVIT & TRANSFER ON DEATH INSTRUMENT (TODI) DEED PAGE 2 OF 2 (COURTESY FORM)

In witness whereof, the undersigned beneficia	ies hereby accept the t	ransfer of residential rea	al estate under th	e Transfer	
on Death Instrument, this/ Z	(day) of Moy	(month), _	2021	(year).	
Bene	ficiary Name & Signate	ure Section:			
•					
EBONY Griffw Print Beneficiary Name Above		Print Beneficiary N	ame Ahove		
O- n A A		, iii k oo iioida ji i	41107.0070	-	
- Plum -	 			·	
Se reficially Signature Above		Beneficiary Signal	ure Above		
10	. •	. 4	• .		
	<u> </u>	5:10			
Print Beneficiony Name Above		Print Beneficiary N	ame Above		
Beneficiary Signature Above		Beneficiary Signat	ure Above		
				,	
	0				
Print Beneficiary Name Above	τ_{\circ}	Print Beneficiary N	ame Above		
		•			
Beneficiary Signature Above		Beneficiary Signat	ure Above		
,	Notani Dublia Silat	·	•		
STATE OF ILLINOIS	Notary Public Sect	ion:			
ss	•				
COUNTY OF		ζ/ <u>Z</u> .		•	
1, the undersigned, a Notary Public in and fo	r the State aforesaid, DO	HEREBY CERTIFY THAT			
	·				
List the Name(s) of ALL Be	neficiary/ies) who annear	ed personally before you a	P.IVF		
Elat the Name(s) of NEE 50		sa potasiany belove your	<u>C</u>		
personally known to me to be the same personally					
instrument, appeared before me this day in	person and swore on oatr	to the above foregoing an	idavit.		
Signed and sworn to before me this) (day) of / ∫	ay (month)	(year).		
10	<u></u>	WIFEGEBO			
1/19/1/le	į	7,004602		į	
Signature of Notary Above	AFFi	A S COMMISSION	P HERE		
Wall I was to be to		01/31/2022		į	
Print Name of Notary Above		NOTADIVE USE		1	
This form is	This form is KAREN A. YARBROUGH Pag				
compliments of: COOK COUNTY RECORDER OF DEEDS					
	300.10001111			of 2	

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LEGAL DESCRIPTION

Lot Twenty-two (22) in Block Four (4) in West Chicago Land Company's Subdivision of the North West Quarter (Nw1/4) of the North West Quarter (Nw1/4) of Section Ten (10), Township Thirty-nine North (39n), Range Thirteen (13), East (E) of the Third (3rd) Principal Meridian, in Cook County Illinois.

Permanent Index Number (PIN):

16-10-103-001-0000

Address(es) of Real Estate:

e: 4657 W Superior, Chicago, IL 60644