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PREPARED BY and MAIL TO:

Carl Hansberry
1139 LEAVITT AVE Apt 215



Doc# 2129915032 Fee \$41.00

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

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 10/26/2021 01:13 PM PG: 1 OF 3

Flossmoor, IL, 60422
NAME & ADDRESS OF PROPERTY OWNER:

JUANITA Hansberry Hudson
1139 LEAVITT AVE Apt 215
Flossmoor, IL, 60422

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: 10-26-2021, by the property owner or owners, whose name is or are: JUANITA
Hansberry Hudson, and currently live at the street address of: 1139 LEAVITT AVE Apt 215
in the city of: Flossmoor and county of: Cook, in the state of: IL

with a zip code of: 60422, 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
CH 1257764

PROPERTY IDENTIFICATION NUMBER(PIN): 31-12-202-064-1027

COMMONLY REFERRED TO ADDRESS: 1139 LEAVITT AVE, Apt 215
Flossmoor, IL, 60422

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.

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TRANSFER ON DEATH INSTRUMENT - PAGE 2 (THIS INSTRUMENT IS EXEMPT PURSUANT TO § 35-1LCS 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)
<u>CARL HANSBERRY</u>			
<u>1139 LEAVITT AVE apt 215</u>			
<u>ELSMOOR, IL, 60422</u>			

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): Jeanette Hansberry Hudson PRINT OWNER NAME (B): _____

SIGNATURE OF OWNER (A): Jeanette Hansberry Hudson SIGNATURE OF OWNER (B): _____

DATE SIGNED BEFORE NOTARY: 10-26-2021 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 the owner or owners voluntary TODI in our presence, at the request of the owner or owners, 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): James Carr PRINT WITNESS NAME (B): Frank B. Collins Jr

SIGNATURE OF WITNESS (A): [Signature] SIGNATURE OF WITNESS (B): [Signature]

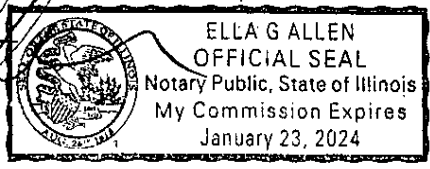
DATE SIGNED BEFORE NOTARY: 10/26/2021 DATE SIGNED BEFORE NOTARY: Oct. 26, 2021

NOTARY VERIFICATION SECTION:

STATE OF Illinois)
COUNTY OF Cook) SS
DATE NOTARIZED: 10-26-2021

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: ELLA G ALLEN SIGNATURE OF NOTARY: [Signature]



File No. CHI257764

Appendix A

21310657

UNIT NO 215 AS DELINEATED ON THE SURVEY OF THE FOLLOWING DESCRIBED PARCEL OF REAL ESTATE: LOT 1 IN RESUBDIVISION OF LOTS 1 TO 8, BOTH INCLUSIVE, OF SUBDIVISION OF SOUTH 300 FEET OF LOT 1, IN BLOCK 2 IN WELLS AND NELLEGARS SUBDIVISION OF THE NORTH 17 1/2 ACRES WEST OF ILLINOIS CENTRAL RAILROAD COMPANY OF THE NORTH EAST 1/4 OF SECTION 12, TOWNSHIP 35 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS WHICH SURVEY IS ATTACHED AS EXHIBIT A TO THE DECLARATION OF CONDOMINIUM OWNERSHIP MADE BY AMERICAN NATIONAL BANK OF CHICAGO, AS TRUSTEE UNDER TRUST AGREEMENT DATED JANUARY 10, 1972, AND KNOWN AS TRUST NUMBER 76407 RECORDED IN THE OFFICE OF THE RECORDER OF DEEDS OF COOK COUNTY, ILLINOIS AS DOCUMENT 22628042 AND AMENDED BY DOCUMENT 22639249; TOGETHER WITH AN UNDIVIDED 2.218 PERCENT INTEREST IN SAID PARCEL (EXCEPTING FROM PARCEL ALL OF THE PROPERTY AND SPACE COMPRISING ALL OF THE UNITS THEREOF AS DEFINED AND SET FORTH IN SAID DECLARATION AND SURVEY IN COOK COUNTY, ILLINOIS.

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