## PREPARED BY and MAIL TO: UNOFFICIAL COPY

Angela N. Seaberry
1000 E. 53rd Street #617
ONICAGO, IL 60615  NAME & ADDRESS OF PROPERTY OWNER:
NAME & ADDRESS OF PROPERTY OWNER:
Willie D. Anderson
5402 S Drexel Ave
Chicago 10 60615



Doc# 2213619012 Fee \$41.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00 CAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 05/16/2022 10:58 AM PG: 1 OF 2

## ILLINOIS RESIDENTIAL RANSFER ON DEATH INSTRUMENT (TODI) PURSUANT TO \$ 755 ILCS 27/1 ET SEQ

THIS <b>TRANSFER ON DEATH INSTRUM</b> IN (hereinafter referred to as a "TODI"), which was completed and signed before a notary public on the
following date: $\frac{9/2/202}{}$ , by the property owner or owners, whose name is or are:
Willie D. Anderson and currently live at the street address of: 5402 S Drexel Ave
in the city of: Chicago, and county of: Cook, in the state of: Illinois
with a zip code of: 60615 , 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 abrive-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 dely recorded DEED or other CONVEYANCE INSTRUMENT which was
recorded on the date of: $01/04/2012$ as document number: $1200428032$ with the proper County Agency in the
County of: <u>Cook</u> in the State of Illinois. Furthermore, this <b>IOD</b> is intended to transfer the following real property:
LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN BELOW - OR- SEE ATTACHED
LOT 2 IN H.P. W WILBUR'S SUBDIVISION OF LOTS 1,2,3, AND 4 IN BLOCK 1 IN THE RESUBDIVISION OF BLOCK
12, IN DREXEL AND SMITH'S SUBDIVISION OF THE WEST 1/2 OF THE NORHWES7 1/4 AND WEST 1/4 OF
SOUTHEAST 1/4 OF SECTION 11, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE PARD PRINCIPAL
MERDIAN, IN COOK COUNTY, ILLINOIS
PROPERTY IDENTIFICATION NUMBER(PIN): 2 0 - 1 1 - 3 2 6 - 0 2 0 - 0 0 0 0
COMMONLY REFERRED TO ADDRESS: 5402 SOUTH DREXEL AVE
CHICAGO, IL 60615

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 II, 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.

## NOFFICIAL CO

TRANSFER ON DEATH INSTRUMENT - PAGE 2 (THIS INSTRUMENT IS EXEMPT PURSUANT TO \$ 35 ILCS 200/31-45, PARA, IL 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 **DWNER**, or last to die of the **DWNERS**, 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 **DWNER** or **DWNERS**, the following CONTINGENCY BENEFCIARY or BENEFICIARIES should receive the interest outlined in this instrument, in the designated TENANCY TYPE: BENEFICIARY (B) BENEFICIARY (C) BENEFICIARY (A) BENEFICIARY (D) Jason D. ANDERSON 50N If more **BENEFICIARIES** 21.2 di sired, please attach separate sheet of paper with the full names and addresses of the desired additional **BENEFICIARIES**. Also, if there are multiple beneficiaries, the DWNER or DWNER desires that the transfer be to those BENEFICIARIES IN THE FOLLOWING TENANCY TYPE: CHOOSE ONE (ONLY): JOINT TENAMTS IN COMMON W/ RIGHT OF SURVIVORSHIP -OR- TENANTS IN COMMON W/D RIGHT OF SURVIVORSHIP In the event all of the above-referenced BEACFICIARIES pre-decease the owner/owners, the following CONTINGENCY BENEFICIARIES shall replace them. CONTINGENCY BENEFICIARY (C) **CONTINGENCY BENEFICIARY (A)** CUNTINGENCY BENEFICIARY (B) CONTINGENCY BENEFICIARY (D) I, or we, the **SOLE DWNERS** hereby swear and affirm that the foregoing wishes were made as my or our free and voluntary act for the purposes set forth. PCINT DWNER NAME (B): PRINT OWNER NAME (A): (1); / SIGNATURE OF OWNER (B): SIGNATURE OF OWNER (A): DATE SIGNED BEESKE NOTARY: DATE SIGNED BEFORE NOTARY: WITNESS DECLARATION - THIS SECTION IS TO BE ATTESTED TO AND SIGNED IN THE PRESENCE OF THE OWNER, DWNERS, ALL WITNESSES, AND NOTARY PUBLIC: We, the undersigned witnesses, hereby certify that the foregoing TODI was executed and signed on the date reverse and 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 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 with cases. PRINT WITNESS NAME (B): PRINT WITNESS NAME (A) SIGNATURE OF WITNESS (B): SIGNATURE OF WITNESS (A) DATE SIGNED BEFORE NOTARY: DATE SIGNED BEFORE NOTARY: NOTARY VERFICATION SECTION: STATE OF Illinois DATE NOTARIZED: 9/2, COOK COUNTY OF

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: Angelan. Sabory SIGNATURE OF NOTARY:

AFFIX NOTARY STAMP BELOW:

ANGELA N SEABERRY Official Seal Notary Public - State of Illinois