THIS INSTRUMENT WAS PREPARED BY MAIL TO	TAL COPY		
Shirley Toyce			
14417 Drevel Ave	*2230522037* Doc# 2230522037 Fee \$41.00		
Dolton IL. 60419	2HSP FEE:\$9.00 RPRF FEE: \$1.00		
NAME & ADDRESS OF PROPERTY OWNER:	CAREM A. YARBROUGH		
Shirley Joyce	DATE: 11/01/2022 11:46 AM PG: 1 OF 2		
14417 DRexel Ave			
Dolton F. 60419			
	FER ON DEATH INSTRUMENT (TODI) 255 ILCS 27/1 ET SEQ.		
THIS TRANSFER ON DEATH INSTPUNCENT (hereinafter refe	rred to as a TODI), which was completed and signed before a		
notary public on the following date: 1000 = 2 =			
whose name(s) is/are: Shirley Jouce	, and currently live(s)		
at the street address of: 14417 PRIXE AV	in the City of: DOHON		
	the State of: <u>ILLINDIS</u> with a		
	I mind and disposing memory, do/does now hereby make(s),		
	the following: That the above-referenced property owner(s), is/		
	ecorded DEED or other CONVEYANCE INSTRUMENT which was		
recorded on the date of: NOVEMBER 30, 2011 as of	· /×.		
proper County Agency in the County of: COO K intended to transfer the following real property:	in the State of Illinois. Furthermore, this TODI is		
LEGAL DESCRIPTION: CHECK WHICH APPLIES - X			
	econd addition parts of lots 1 to 3 in the		
	e wist 1/2 of the southwest 1/4 of section 2, township		
_31, North, Range 14, East of the third principal	millian, in Cook county, Filinois.		
PROPERTY INDEX NUMBER(PIN): 29 - D	2-319-006-0000		
COMMONLY REFERRED TO ADDRESS: 14417 D	Rexe! A Venue		
Dolton	IL. 60419		
Finally, the owner(s), while also being of competent mind a	nd capacity, while waiving and releasing all rights under		
the Homestead Exemption laws of the State of Illinois, do(es) now hereby <u>CONVEY</u> and <u>TRANSFER</u> , effective upon the death of the above-named <u>OWNER</u> , or last to die of the <u>OWNERS</u> , the above-described real property to the named			
BENEFICIARY or BENEFICIARIES on the following page in the			
	,		

SPECIAL NOTICE: This form is provided compliments of COOK COUNTY CLERK KAREN A. YARBROUGH, and DOES NOT CONSTITUTE LEGAL ADVICE. 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. COOK COUNTY CLERK'S OFFICE STAFF MAY NOT assist you with the preparation of this, or any legal document.

2230522037 Page: 2 of 2

PAGE (THIS INSTRUMENT SEXEMPT PURSUANT TO \$35 ILLS 200, 31-45, PARA, PROPERTY TAX CODE) TRANSFER ON DEATH INSTRUMENT

As referenced on the foregoing page, the aforementioned OWNER(S) does 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 predecease the OWNER or OWNERS, the following CONTINGENCY BENEFICIARY or BENEFICIARIES should receive the interest outlined in this

instrument, in the designated TENA	NCY TYPE:		
BENEFICIARY (A)	BENEFICIARY (B)	BENEFICIARY (C)	BENEFICIARY (D)
William Joyce Jr			
14417 Drexel Ave			
Do ton IL 60419			
If more BENEFICIARIES are desired, Also, if there are multiple beneficiar TENANCY TYPE: CHOOSE ONE (ONLY): \(\sum_ \sum	ies, the OWNER(S) desire(s) receive	e the transfer, it should be BENEFICI	ARIES IN THE FOLLOWING
In the event all of the above reference replace them:	iced BENEFICIARIES pre-decease th	e owner/owners, the following CON	ITINGENCY BENEFICIARIES shall
CONTINGENCY BENEFICIARY (A) Maurice Jouce	CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)
Dolfon Fl. 6419			
I, or we, the SOLE OWNER(S) hereby purposes set forth.	0/	ng wishes were made as my/our fre	e and voluntary act for the
PRINT OWNER NAME (A): SIGNATURE OF OWNER (A):	urley Joyce	PRINT OWNER NAME (B):	***
SIGNATURE OF OWNER (A):	huld serger	SIGNATURE OF OWNER (B):	
DATE SIGNED BEFORE NOTARY: / !	1/) / /	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 A MOTARY PUBLIC:			
We, the undersigned witnesses, he	reby certify that the foregoing TO	DI was executed and signed on the	date referenced above, and
signed by the owner(s) as her, his, or presence of one another. We also d			
and knowledge that the owner or confluence or coercion by any parties	owners, was or were, at the time o		
		7	los Comunals
PRINT WITNESS NAME (A):	Jomi Lee	PRINT WITNESS NAME (B):	Distribueis
SIGNATURE OF WITNESS (A):	MM XXX	SIGNATURE OF WITNESS (B):	eleca Januell
DATE SIGNED BEFORE NOTARY:	0-23-2022	DATE SIGNED BEFORE NOTARY:	10/23/2002
STATE OF Throis	NOTARY VERIFIC	<u>ation section:</u> Date Notarized: <u></u> O ct 6 lo	e-23.2020
))SS	DATE NOTARIZED:	(7 63)6000
COUNTY OF COOK)		RIVANDA DOSS BEAL OFFICIAL SEAL
I, the undersigned, a notary public in			
the owner or owners, and witnesses subscribed on the foregoing instrum			Commission Expires Aug 25, 2024
delivered the foregoing instrument of forth.			
PRINT NOTARY NAME: RWan	da Doss. Beal	SIGNATURE OF NOTARY:	moz Bel