UNOFFICIAL COPY

THIS INSTRUMENT WAS PREPARED BY/MAIL TO:

Pene Carter

By Parish Pl

Highland In 40300

NAME & ADDRESS OF PROPERTY OWNER:

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

KAREN A. YARBROUGH
COOK COUNTY CLERK
DATE: 11/08/2022 02:13 PM PG: 1 OF 2

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: Nov. 08, 2002	, by the property owner or owners
whose name(s) is/are: Rene Civitio	, and currently live(s
at the street address of: 8421 Parr Sh. Pl	in the City of: Highland
	of: Indiana with a
zip code of: 40302 while being of sound mind and	disposing memory, do/does now hereby make(s)
declare(s) and publishes this TODI, stating and attesting to the following	g: That the above-referenced property owner(s), is,
are, the SOLE owner(s) of the real property, under a duly recorded DEF	
recorded on the date of: 0217200 as document no	mber: <u>OO1186035</u> 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:	C,
LEGAL DESCRIPTION: CHECK WHICH APPLIES – 💢 WRITTEN BI	ELOW SEE ATTACHED
of 37 (except the west 24 feet bindres-thereof) and	nest library lancher of 64-38 in
block 3 in chicago title and trust companie addit	ion to Pullmanizzothe nach east 1/4
ofsection 15, township 37 north, range 14 east of 4	nethird principal regridian
PROPERTY INDEX NUMBER(PIN): 25-15-21	
COMMONLY REFERRED TO ADDRESS: 100 E. 105	In St
Chiago, II	26400
Finally, the owner(s), while also being of competent mind and capacity,	

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.

the Homestead Exemption laws of the State of Illinois, do(es) 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 **BENEFICIARIES** on the following page in the specified **TENANCY TYPE** if multiple **BENEFICIARIES**.

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TRANSFER ON DEATH INSTRUMENT - PAGE 2 (THIS INSTRUMENT IS EXEMPT PURSUANT TO § 35 ILCS 200/31-45, PARA, PROPERTY TAX CODE)

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 TENANCY TYPE: BĘNEFICIĄRY (A) BENEFICIARY (B) **BENEFICIARY (C)** BENEFICIARY (D) VISTIM (If more BENEFICIARIES are desired, please attach separate sheet of paper with the full names of the desired additional BENEFICIARIES. Also, if there are multiple beneficiaries, the OWNER(S) desire(s) receive the transfer, it should be BENEFICIARIES IN THE FOLLOWING **TENANCY TYPE:** CHOOSE ONE (ONLY): 1 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 OWNER(S) hereby swear and affirm that the foregoing wishes were made as my/our free and voluntary act for the purposes set forth. PRINT OWNER NAME (A): PRINT OWNER NAME (B): SIGNATURE OF OWNER (A) SIGNATURE OF OWNER (B): __ DATE SIGNED BEFORE NOTARY: \(\lambda\) 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 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(s) as her, his, or their voluntary TODI in our presence, at the request of new, pinn or them, and while also in the presence of one another. We also do now hereby swear and affirm that we are signing our name; 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 mernory, and free from any undue influence or coercion by any parties, including us as witnesses. PRINT WITNESS NAME (A): PRINT WITNESS NAME (B): SIGNATURE OF WITNESS (A): DATE SIGNED BEFORE NOTARY: DATE SIGNED BEFORE NOTARY: \\ **NOTARY VERIFICATION SECTION:** DATE NOTARIZED: 11 108 17 02 7 STATE OF)SS **COUNTY OF** I, the undersigned, a notary public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that STANDARD OW PRIETO the owner or owners, and witnesses, personally known to me to be the same persons whose names are Commission Number 0648125 subscribed on the foregoing instrument, appeared before me on the below date and signed, sealed and My Commission Expires delivered the foregoing instrument as their free and voluntary act, for the uses and purposes therein set October 7, 2029 forth.

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Rev. 02.08.22