THIS INSTRUMENT WAS PREVARED BY MAIL TO BRENT VERHOOG	CIAL COPY
701 FOREST ROAD	~
GLENVIEW, IL 60025	- Doc# 2231815038 Fee \$46.00
NAME & ADDRESS OF PROPERTY OWNER: BRENT VERHOOG	RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH COOK COUNTY CLERK
701 FOREST ROAD	DATE: 11/14/2022 02:24 PM PG: 1 OF 2
GLENVIEW, IL 60025	<u>.</u>

PURSUANT TO § 755 ILCS 27/1 ET SEQ.

THIS TRANSFER ON DEATH INSTRUMENT (hereinafte	er referred to as a TODI), which wa	as completed and signed before a
notary public on the following date: 11/09/2		, by the property owner or owners,
whose name(s) is/are: Brent D. Vahoog		, and currently live(s)
at the street address of: 701 Forest Road	in the City of	Glenview
and County of: Cook	in the State of: Illinois	with a
zip code of: $\underline{}$, while being of	sound mind and disposing memo	ry, do/does now hereby make(s),
declare(s) and publishes this TODI, stating and attest		
are, the SOLE owner(s) of the real property, under a	duly recorded DEED or other CON	VEYANCE INSTRUMENT which was
recorded on the date of:	as document number:	with the
proper County Agency in the County of: Cook	in the State	of Illinois. Furthermore, this TODI is
intended to transfer the following real property:		
LEGAL DESCRIPTION: CHECK WHICH APPLIES -	- X WRITTEN BELOW	SEE ATTACHED
Lot 7 and the North half of vacated Cluxton		
a subdivision of the East 1/2 of the South 17		
West 1/4 of Section 31, Township 42 North, Range	ge 13 East of the Third Principal	Meridian in Cook County Illinois
PROPERTY INDEX NUMBER(PIN): 0 5 -	3 1 _ 3 1 3 _ 0 1	7_0000.
COMMONLY REFERRED TO ADDRESS: 701 Fc	orest Road Glenview, Illinois 600	225
		P-2
Finally, the owner(s), while also being of competent the Homestead Exemption laws of the State of Illinoi	mind and capacity, while waiving ar	nd releasing all rights under
death of the above-named OWNER , or last to die of		
BENEFICIARY or BENEFICIARIES on the following page		

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.

TRANSFER ON DEATH INSTRUMENT TO 935 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:

BENEFICIARY (A) Bennett Michael Verhoog	BENEFICIARY (B)	BENEFICIARY (C)	BENEFICIARY (D)
701 Forest Road			
Glenview, IL 60025		·	
Also, if there are multiple beneficial TENANCY TYPE:	aries, the OWNER(S) desire(s) receive	per with the full names of the desire the transfer, it should be BENEFICIAL VIVORSHIP -OR-	ARIES IN THE FOLLOWING
In the event all of the above refere replace them:	enced BENEFICIARIES pre-decease th	ne owner/owners, the following CON	TINGENCY BENEFICIARIES shall
CONTINGENCY BENEFICIARY (A) Grace Olivia Verhoog	CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)
309 W Johnson St	7		
Madison, WI 53703			
I, or we, the SOLE OWNER(S) hereb purposes set forth.	by swear and affirm that the foregoi	ing wishes were made as my/our free	e and voluntary act for the
PRINT OWNER NAME (A): Brent	t D. Verhoog	PRINT OWNER NAME (B):	
SIGNATURE OF OWNER (A):	m	GIGNATURE OF OWNER (B):	
DATE SIGNED BEFORE NOTARY:	11/09/2022	DATE SIGNED BEFORE NOTARY:	10 10 10 10 10 10 10 10 10 10 10 10 10 1
		S TO BE ATTISTED TO AND SIGNED IN	
		LL WITNESSES, AND A MOTARY PUBLIC	
signed by the owner(s) as her, his,	ereby certify that the foregoing TOI , or their voluntary TODI in our pres	DI was executed and lighed on the description or the server, at the request of her, him or t	date referenced above, and them, and while also in the
presence of one another. We also	do now hereby swear and affirm th	hat we are signing our names to this	s instrument with the belief
and knowledge that the owner or influence or coercion by any partie		of signing of sound mind and maino	ry, and free from any undue
	ROME CROKIN	PRINT WITNESS NAME (B):K	TAREN CROKIN
SIGNATURE OF WITNESS (A):	mal Cokin	(SIGNATURE OF WITNESS (B):	men Cishi
DATE SIGNED BEFORE NOTARY:	11/09/2022	DATE SIGNED BEFORE NOTARY:	11/09/2022
	NOTARY VERIFICA	ATION SECTION:)
STATE OF Illinois)	DATE NOTARIZED: 1	9/2022
COUNTY OF COOK)SS)	•	·
I, the undersigned, a notary public	in and for said County, in the State a	oforesaid, DO HEREBY CERTIFY that	AFFIX NOTARY STAMP BELOW:
the owner or owners, and witnesse	es, personally known to me to be the ment, appeared before me on the be	e same persons whose names are	JAMES WISTORZ Official Seal

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-SIGNATURE OF NOTARY

delivered the foregoing instrument as their free and voluntary act, for the uses and purposes therein set

forth.

PRINT NOTARY NAME

Official Seal

Notary Public - State of Illinois My Commission Expires Oct 3, 2023