THIS INSTRUMENT WAS PREPARED BY MAIL TO CALC	OPY.
Constitution	%2234734019* Doc# 2234734019 Fee \$41.00
	RHSP FEE:\$9.00 RPRF FEE: \$1.00 Karen a. Yarbrough
NAME & ADDRESS OF PROPERTY OWNER:  Cassandra Mc Michael	COOK COUNTY CLERK  DATE: 12/13/2022 02:29 PM PG: 1 OF 2
9041 Gouth Aberdeen St. Chiman TL 60620	_
PURSUANT TO § 755 ILCS 27/1 ET	The state of the s
and County of:	by the property owner or owners, and currently live(s) City of:  City of:  With a sing memory, do/does now hereby make(s), the above-referenced property owner(s), is/other CONVEYANCE INSTRUMENT which was
LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN BELOW	Oor - SEE ATTACHED
Lot 32 in black 3 in Cole's Subdivision of 20 acres of the west 1/2 of the Northeast 1/4	
PROPERTY INDEX NUMBER(PIN): 25-05-228	- <u>014-0000</u> S
COMMONLY REFERRED TO ADDRESS: 9041 S. Aberdeen	, Chicago, IL 60620.
Finally, the owner(s), while also being of competent mind and capacity, while the Homestead Exemption laws of the State of Illinois, do(es) now hereby <u>COI</u> death of the above-named <u>OWNER</u> , or last to die of the <u>OWNERS</u> , the above-	NVEY and TRANSFER, effective upon the described real property to the named
BENEFICIARY or BENEFICIARIES on the following page in the specified TENAN	ITY CLEDY NADEN A VARROUGH

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.

2234734019 Page: 2 of 2

TRANSFER ON DEATH INSTRUMENT - DATE (1415 NETRUMENT & EXEMPT PURSUANCES 200/11-45, PARA, PROPERTY TAX CODE)

As referenced on the foregoing page, the aforementioned OWN		
the above-named OWNER, or last to die of the OWNERS, the ab in the specified TENANCY TYPE if multiple BENEFICIARIES are list decease the OWNER or OWNERS, the following CONTINGENCY	ted. Additionally, in the event the BENEFICI.	ARY or BENEFICIARIES pre-
instrument, in the designated TENANCY TYPE:	BENEFICIARY OF BENEFICIARIES SHOULD rece	eive the interest outlined in this
Valing Patton-Smith Bryson Patton.	BENEFICIARY (C)	BENEFICIARY (D)
Washington DENERGY and Assessed as Inches and Assessed as Inches a		I III
If more BENEFICIARIES are desired, please attach separate sheet Also, if there are multiple beneficiaries, the OWNER(S) desire(s) TENANCY TYPE:  CHOOSE ONE (ONLY): 1 JOIN T TENANTS IN COMMON W/ RIGHT O	receive the transfer, it should be BENEFICIA	ARIES IN THE FOLLOWING
in the event all of the above-rererenced BENEFICIARIES pre-decerplace them:		
CONTINGENCY BENEFICIARY (A) CONTINGENCY BENEFICIARY  DEMOTRIUS EVOCA	(B) CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)
		Note to the second of the seco
I, or we, the SOLE OWNER(S) hereby swear and affirm that the fipurposes set forth.	oregoing wishes were made as my/our free	and voluntary act for the
PRINT OWNER NAME (A): Cassandra Mc Mic	PRINT OWNER NAME (B):	
SIGNATURE OF OWNER (A):	signature of owner (B):	
DATE SIGNED BEFORE NOTARY: 17-29-22	/ DATE SIGNED BEFORE NOTARY:	
	TION IS TO BE ATTESTED TO AND SIGNED IN T	
PRESENCE OF THE OWNER/OWN We, the undersigned witnesses, hereby certify that the foregoi	NERS, ALL WITNESSES, A (D.A. NOTARY PUBLIC ing TODI was executed and sizned on the c	
signed by the owner(s) as her, his, or their voluntary TODI in ou	ur presence, at the request of high him or t	hem, and while also in the
presence of one another. We also do now hereby swear and af and knowledge that the owner or owners, was or were, at the		
influence or coercion by any parties, including us as witnesses.		, and recention any unduc
PRINT WITNESS NAME (A): SUSAN JOTO	PRINT WITNESS NAME (B):	Sandraklana 1 LTON
SIGNATURE OF WITNESS (A): Busan Boto	SIGNATURE OF WITNESS (B):	
DATE SIGNED BEFORE NOTARY: 11 2912022	DATE SIGNED BEFORE NOTARY:	1
	ERIFICATION SECTION:	<b>,</b>
STATE OF This	DATE NOTARIZED: 11/2012	2
county of Cook )ss		
I, the undersigned, a notary public in and for said County, in the		AFFIX NOTARY STAMP BELOW:
the owner or owners, and witnesses, personally known to me to		TIA F. COCKRELL
subscribed on the foregoing instrument, appeared before me or delivered the foregoing instrument as their free and voluntary a		OFFICIAL SEAL Notary Public - State of Illinois
forth.	<b>N</b>	My Commission Expires Apr 26, 2023
PRINT NOTARY NAME: Tig Cochell	SIGNATURE OF NOTARY:	