THIS INSTRUMENT WAS PREPARED BY/MAIL TO Doc# 2312357001 Fee \$41.00 RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH COOK COUNTY CLERK DATE: 05/03/2023 09:57 AM PG: 1 OF 2 ILLIMOIS REAL PROPERTY TRANSFER ON DEATH INSTRUMENT (TODI) 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: , by the property owner or owners, whose name(s) is/are: and currently live(s) at the street address of: in the City of: and County of: LOOK in the State of: Illino16 zip code of: (00H , 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: That the above-referenced property owner(s), is/

LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN BELOW

are, the SOLE owner(s) of the real property, under a duly recorded DEED or other CONVEYANCE INSTRUMENT which was

as document number:

LOT 10 (EXCEPT THE NORTH 5 FEET THEREOF) IN BLOCK 30 IN THE FOURTH ADDITION TO PACESETTER PARK, HARRY M. QUINN MEMORIAL SUBDIVISION BEING A SUBDIVISION OF PART OF LOT 1 IN TY'S GOWENS SUBDIVISION OF THE SOUTHWEST FRACTIONAL 1/4 OF SECTION 14 AND PART OF THE SOUTHEAST 1/4 OF SECTION 15 ALCO PART OF THE

SOUTHEAST 1/4 OF SECTION 14 ALL IN TOWNSHIP 36 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING SOUTH OF THE LITTLE CALUMET RIVER, IN COOK COUNTY, ILLINOIS.

recorded on the date of:

proper County Agency in the County of:

intended to transfer the following real property:

.08-1999

PROPERTY INDEX NUMBER(PIN):

COMMONLY REFERRED TO ADDRESS:

0905019

in the State of Illinois. Furthermore, this TODI is

Finally, the owner(s), while also being of competent mind and capacity, while waiving and releasing all rights under 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 **BENEFICIARY** or **BENEFICIARIES** on the following page in the specified **TENANCY TYPE** if multiple **BENEFICIARIES**.

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.

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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:

BENEFICIARY (A)	BENEFICIARY (B)	BENEFICIARY (C)	BENEFICIARY (D)
Britni R. Luster			
3158 Crane Pl. Ha	moord, M. 46323	3	
If more BENEFICIARIES are desired, p Also, if there are multiple beneficiarion TENANCY TYPE: CHOOSE ONE (ONLY): [] JOINT TENAN	lease attach separate sheet of pa es, the OWNER(S) desire(s) receiv	per with the full names of the desire the transfer, it should be BENEFICIA	ARIES IN THE FOLLOWING
In the event all of the above-reference replace them:	ed BENEFICIARIES pre-decease th	ne owner/owners, the following CON	ITINGENCY BENEFICIARIES shall
	CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)
	0x		
I, or we, the SOLE OWNER(S) hereby purposes set forth.		ing wishes were made as my/our fre	e and voluntary act for the
PRINT OWNER NAME (A): Phyll	15 E. Rozier	I RINT OWNER NAME (B):	
SIGNATURE OF OWNER (A):	lake Loyer	SIGNATURE OF OWNER (B):	
DATE SIGNED BEFORE NOTARY:	4/23/23	DATE SIGNED BEFORE NOTARY:	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	S TO BE ATTESTED TO AND SIGNED IN	
<u>بعرب</u> We, the undersigned witnesses, her		ALL WITNESSES, AND A NO (ARY PUBLI DI was executed and signed on the	
signed by the owner(s) as her, his, o	r their voluntary TODI in our pres	sence, at the request of hea, bin or t	them, and while also in the
presence of one another. We also do	•		
and knowledge that the owner or or	- · · · · · · · · · · · · · · · · · · ·	of signing of sound mind and mend	ry, and free from any undue
influence or coercion by any parties	, including us as witnesses.	D	UxL T
PRINT WITNESS NAME (A):	1CI Morton	PRINT WITNESS NAME (B):	ryere Levers
SIGNATURE OF WITNESS (A):	raci Horth	SIGNATURE OF WITNESS (B):	vrette Devers
DATE SIGNED BEFORE NOTARY:	423/23	DATE SIGNED BEFORE NOTARY:	4/23/23
,	NOTARY VERIFIC	ATION SECTION:	
STATE OF Illinois)	DATE NOTARIZED:	23-2023
COUNTY OF COOK)SS)		
I, the undersigned, a notary public in the owner or owners, and witnesses, subscribed on the foregoing instrume	personally known to me to be the ent, appeared before me on the b	ne same persons whose names are below date and signed, sealed and	AFFIX NOTARY STAMP BELOW: OFFICIAL BEAL
delivered the foregoing instrument a forth.	s their free and voluntary act, for	the uses and purposes therein set	DEVIN N. LUSTER NOTARY PUBLIC, STATE OF ILLINO
PRINT NOTARY NAME:	n N. Luster	SIGNATURE OF NOTARY:	NO COMMISSION PROTES November 14, 20

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