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2313798903

THIS INSTRUMENT WAS PREPARED BY/MAIL TO:	Doc# 2313708003 Fee \$41.00
Juanetta J. Moore	RHSP FEE:\$9.00 RPRF FEE: \$1.00
	KAREN A. YARBROUGH
	COOK COUNTY CLERK
	DATE: 05/17/2023 09:25 AM PG: 1 OF 2
NAME & ADDRESS OF PROPERTY OWNER:	
Juanetta J. Moore	
509 S. Weber Rd. apt. 102	
Romeoville, J. Hinois 60446	
ILLINO SEAL PROPERTY TRANSFER ON DE	EATH INSTRUMENT (TODI)
PURSUANT TO § 755 ILCS 27	
THIS TRANSFER ON DEATH INSTRUMENT (hereinafter referred to as a	TODI) which was completed and signed before a
notary public on the following date:	
whose name(s) is/are: Juanetta J. Moore	, by the property owner or owners,
at the street address of: 509 3. Weber Rd AH 132	•
	of:
zip code of: 60446 while being of sound mind and	
declare(s) and publishes this TODI, stating and attesting to the iollowing	
are, the SOLE owner(s) of the real property, under a duly recorded DF.	
recorded on the date of: $10-24-2001$ as document nu	
	in the State of Illinois. Furthermore, this TODI is
intended to transfer the following real property:	
	~/ <u>/</u>
LEGAL DESCRIPTION: CHECK WHICH APPLIES – 🔀 WRITTEN BE	ELOW - or - [SEE ATTACHED
Lot 39 In Christopher Columbus addition to Jack	Kson Park said a laition being a
Subdivision of blocks 4 and 5 N G.W. Clarke's Sub	
14. of Section 25, Township 38 North, Range 14, East of	of the Third Principal Mendian, Cook County, Illinoi
PROPERTY INDEX NUMBER(PIN): $\frac{20}{25} - \frac{35}{25} - \frac{10}{25}$	6-004-0080
COMMONLY REFERRED TO ADDRESS: 1146 S. Constant	ce Avenue
Chicago, IL. 604	,49
Finally, the owner(s), while also being of competent mind and capacity,	
the Homestead Exemption laws of the State of Illinois, do(es) now here	
death of the above-named OWNER , or last to die of the OWNERS , the	
BENEFICIARY or BENEFICIARIES on the following page in the specified]	<u>renancy type</u> if multiple <u>BENEFICIARIES</u> .

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) diria Standler 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): JOIN', TEY, ANTS IN COMMON W/ RIGHT OF SURVIVORSHIP -OR- TENANTS IN COMMON W/O RIGHT OF SURVIVORSHIP In the event all of the above-referenced CENEFICIARIES pre-decease the owner/owners, the following CONTINGENCY BENEFICIARIES shall replace them: **CONTINGENCY BENEFICIARY (A)** CONTINGENCY BENEFICIARY (B) **CONTINGENCY BENEFICIARY (C) CONTINGENCY BENEFICIARY (D)** DRIGHT Moore 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): JUGNETTA J. MOOVE PRIME OWNER NAME (B): SIGNATURE OF OWNER (A): Quanta J. Moore SIGNATU'AF OF OWNER (B): _ DATE SIGNED BEFORE NOTARY: _5-8-23 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 NUTAKY 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 her, him or them, and while also in the presence of one another. We also do now hereby swear and affirm that we are signing our names 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 memory, 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) SIGNATURE OF WITNESS (8): DATE SIGNED BEFORE NOTARY: DATE SIGNED BEFORE NOTARY: **NOTARY VERIFICATION SECTION:** STATE OF DATE NOTARIZED:

I, the undersigned, a notary public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that the owner or owners, and witnesses, personally known to me to be the same persons whose names are subscribed on the foregoing instrument, appeared before me on the below date and signed, sealed and delivered the foregoing instrument as their free and voluntary act, for the uses and purposes therein set

ISS

PRINT NOTARY NAME:

COUNTY OF

SIGNATURE OF NOTARY:

STACEY S RANKINS **NOTARY PUBLIC - STATE OF ILLINOIS** MY COMMISSION EXPIRES:09/27/24