FONDA CASSON OFFICIAL COF	
8749 S. WALLACE ST	*2315615691*
Chicago IL 60620	Doc# 2316015001 Fee \$41.00
NAME & ADDRESS OF PROPERTY OWNER:	RHSP FEE:\$9.00 RPRF FEE: \$1.00
Ozella Holeman	KAREN A. YARBROUGH COOK COUNTY CLERK
8749 5. WAILACE	DATE: 06/09/2023 09:18 AM PG: 1 OF :
Chicago Il 60620	and the second of the second o
NOIS REAL PROPERTY TRANSFER ON DEATH INST	nedakanakan kepadakan pinakan per
PURSUANT TO § 755 ILCS 27/1 ET SEC	RUMENT (TODI) 2.
THIS TRANSFER ON DEAT! (INSTRUMENT (hereinafter referred to as a TOD), whi	ch was completed and signed before a
notary public on the following date: 4/26/2023	, by the property owner or owners,
whose name(s) is/are: Ozela Holemon	and currently live(s)
at the street address of: \$749. Row WA/IACP in the City	of: Chichel
and County of: COOK in the State of: 7	-//wass with a
zip code of: <u>b0620</u> while being of sound mind and disposing n	nemory, 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/
are, the SOLE owner(s) of the real property, under a duly recorded DEED or other	CONVEYANCE INSTRUMENT which was
recorded on the date of: as (10) ument number:	with the
proper County Agency in the County of:inthe	State of Illinois. Furthermore, this TODI is
intended to transfer the following real property:	
LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN BLLOW -	or - SEE ATTACHED
The state of the s	
	0
PROPERTY INDEX NUMBER(PIN): 25-04-104.	018,000
COMMONLY REFERRED TO ADDRESS: 8749 S. WALLACE	St Co
Chicago IC	60620
Finally, the owner(s), while also being of competent mind and capacity, while waive the Homestead Exemption laws of the State of Illinois, do(es) now hereby CONVEY death of the above-named OWNER, or last to die of the OWNERS, the above-descended of the BENEFICIARY or BENEFICIARIES on the following page in the specified TENANCY T	and TRANSFER, effective upon the
SPECIAL NOTICE: This form is provided compliments of COOK COUNTY of	(FDL (ABELL)

, 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	- MGE 2 THIS I NSTRUMENT IS EDE	AT URSUANT TO \$ 35 LCS 200/51	45, PARA, PROPERTY TAX CODE)
As referenced on the foregoing page the above-named OWNER, or last to in the specified TENANCY TYPE if mu decease the OWNER or OWNERS, th	die of the OWNERS, the above-de ultiple BENEFICIARIES are listed. Ad le following CONTINGENCY BENEFI	scribed real property to the named ditionally, in the event the BENEFIC	BENEFICIARY OF BENEFICIARIES  1ARY OF BENEFICIARIES pre-
instrument, in the designated TENAI BENEFICIARY (A)	BENEFICIARY (B)	BENEFICIARY (C)	BENEFICIARY (D)
FUNDA CISSP			
If more BENEFICIARIES are desired, Also, if there are multiple beneficiar TENANCY TYPE: CHOOSE ONE (ONLY): Upont TENAL In the event all of the above e-reference replace them:	ies, the OWNER(S) desire(s) receivens the COMMON W/RIGHT OF SURV	e the transfer, it should be BENEFIC	IARIES IN THE FOLLOWING
CONTINGENCY BENEFICIARY (*)	CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)
Daniel Cisse	LOVIN CISSE		AND MICHELL AND COMMENT
	0.5		
SIGNATURE OF OWNER (A): DATE SIGNED BEFORE NOTARY:	A 126/2023  LESS DECLARATION - THIS SECTION	SIGNATURE OF OWNER (B):  DATE SIGNED BEFORE NOTARY:  STURE FOR TESTED TO AND SIGNED IN	
<del></del>	ESENCE OF THE OWNER/OWNERS,		
We, the undersigned witnesses, he signed by the owner(s) as her, his, presence of one another. We also and knowledge that the owner or influence or coercion by any partie.	or their voluntary TODI in our pre do now hereby swear and affirm to owners, was or were, at the time	sence, at the properties her, him of that we are signing our names to the	r them, and while also in the nis instrument with the belief
PRINT WITNESS NAME (A):	ortha pense	PRINT WITNESS NAME (B): 5	canna Gilliams
SIGNATURE OF WITNESS (A):	in the Seems	SIGNATURE OF WITNESS (B):	2- Billia
DATE SIGNED BEFORE NOTARY:	4/26/2023	DATE SIGNED BEFORE NOTARY:	4/26/2023
STATE OF TILINOTS COUNTY OF COOK	NOTARY VERIFI ) )SS	CATION SECTION:  DATE NOTARIZED:	26/23.
I, the undersigned, a notary public the owner or owners, and witness subscribed on the foregoing instru delivered the foregoing instrumen forth.	es, personally known to me to be t ment, appeared before me on the t as their free and voluntary act, fo	he same persons whose names are below date and signed, sealed and	Notary Public - State of Illinois My Commission Expires Jun 2, 20
PRINT NOTARY NAME: NO	at 13 arcelong	SIGNATURE OF NOTARY:	2018 Baken

---2316015001 Page: 3 of 3

## UNOFFICIAL COPY

Lot 6 (except the North & feet there of) in Black of Scotion 4 Township 37 North Range 14 Enst of the Third Principal mericlian in Coar Oblinity 1 the Mostla West of the Third 2 5 - 0 4 - 0 1 0 1 0 10 10 10 10 10 10 10 10 10 10	King A D
8749 SO WA HACE ST Chicago ILS 60620	
Colling Clark's Office	