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2316412008

TRANSFER ON DEATH INSTRUMENT

Doc# 2316412008 Fee \$41.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 06/13/2023 11:33 AM PG: 1 OF 2

Owner (Grantor)/Taxes to:

Jane Cairns
333 S. Des Plaines St.
Unit 501
Chicago, IL 60661

Area above for county recorder use only

**Prepared by and return to Owner
Beneficiaries' names and addresses are shown below**

Property Address: 333 S. Des Plaines St., Unit 501, Chicago, IL 60661
Parcel Identification/Index Number: 17-16-118-023-1054

I, Jane Cairns (referred to hereinafter as "Owner"), of the City of Chicago, Cook County, Illinois, being of sound mind and memory, do hereby make, declare, and publish this Transfer on Death Instrument, and state as follows:

That I am the sole owner of the residential real estate located in Cook County, Illinois having the legal description:

UNIT NUMBER 501 AND P2-16 TOGETHER WITH AN UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN THE 333 S. DES PLAINES CONDOMINIUM AS DELINEATED AND DEFINED IN THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT 0329010168 AND AMENDED FROM TIME TO TIME, IN THE SUBDIVISION OF BLOCK 28 OF SCHOOL SECTION ADDITION TO CHICAGO IN SECTION 16, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

This conveyance being hereby made, is subject to:

That, effective upon my death, I convey and transfer the above-described real estate to the then acting trustee of the JANE CAIRNS REVOCABLE TRUST u/a/d June 1, 2023, and I hereby waive and release all rights under the homestead exemption laws of the State of Illinois.

Signed this 1 day of June, 2023.

Owner's signature

S Y
P 2
S Y-1
SC _____
INTR RV

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Witnesses (2 are required)

We, the undersigned witnesses, DO HEREBY CERTIFY:

- 1) The person identified in this Transfer on Death Instrument as Owner signed this Instrument in our presence on the date shown above.
- 2) We signed this Instrument in the presence of the Owner and in the presence of each other.
- 3) We believed the Owner to be of sound mind and memory at the time of signing.

Elizabeth Maycher
 Witness signature
Elizabeth Maycher
 Printed name
1603 Orrington Ave
 Street address
Evanston IL 60201
 City, state, zip code

Sabine Russo
 Witness signature
Sabine Russo
 Printed name
800 Orrington Ave 800
 Street address
Evanston, IL 60221
 City, state, zip code

STATE OF ILLINOIS)
) ss
 COUNTY OF COOK)

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT Jane Cairns and the above-named witnesses, each of whom are either personally known to me or presented satisfactory identification, are the same persons whose names are subscribed to the foregoing Instrument and appeared before me this day in person, and acknowledged that they signed, sealed and delivered said instrument as their free and voluntary acts, for the uses and purposes therein set forth.

Given under my hand and notarial seal, this 1 day of JUNE, 2023.



[Signature]

 Notary Public