THIS INSTRUMENT WAS PREMARED WAS LETE! CIAL	
Juanifa Kelly	
	Doc# 2316615023 Fee \$41.00
Cook County reasurer	RHSP FFF PRO \$41.00
Chicago, 71. 60602	KAREN A. YORT-
NAME & ADDRESS OF PROPERTY OWNER:	COOK COUNTY
Junnita Kelly	DATE: 06/15/2023 02:09 PM PG: 1 OF 2
319 Danielle Rd	PG: 1 of 2
1/a/ecan +1 / 0/1/2	
MUTTESUTI 60440	
PURSUANT TO § 755 II	
THIS TRANSFER ON DEATH INS RUMENT (hereinafter referred to as a	TODI), which was completed and signed before a
notary public on the following page,	
by the property owner or owners, whose ran e/c) is/are: UUA N1	ta Kelly
and currently live(s) at the street address of:	lle Ra.
in the City of: Matteson	
and County of:	Illinois
with a zip code of: 60443 while being of	sound mind and disposing memory, do/does now
hereby make(s), declare(s) and publishes this TODI, stating and atte	esting to the following: That the above-referenced
property owner(s), is/ are, the SOLE owner(s) of the real estate, un	ger z duly recorded DEED or other CONVEYANCE.
Furthermore, this TODI is intended to transfer the following real propert	ty: C
LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN E	BELOW - 01 - 2 SEE ATTACHED
Lot 45 in Michael John Manne unt 2, being a subd	
and the Southwest 14 of section 17, Jourship 35.	14.1
Principal Meridian in Cook Country Ill	insia).
23/10/2	0 -0000
PROPERTY INDEX NUMBER(PIN): 3 -11-114-010	0-000
COMMONLY REFERRED TO ADDRESS: 319 Danie	11e Rd, Matteson,
II, 60443)
Finally, the owner(s), while also being of competent mind and capacit	ty, while waiving and releasing all rights under
the Homestead Exemption laws of the State of Illinois, do(es) now her	

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. Page 1 of 2 - Transfer on Death Instrument - cookcountyclerkil.gov Rev. 2

BENEFICIARY or **BENEFICIARIES** on the following page in the specified **TENANCY TYPE** if multiple **BENEFICIARIES**.

PAGE 2 TIHIS 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:

R. R	ALL CARRON	BENEFICIARY (C)	BENEFICIARY (D)
Jonathan Kelly			
8/8 Lenox ave., Bollogorok II. Loyge	312-504-6029		
If more BENEFICIARIES are desired, p BENEFICIARIES. Also, if there are mult FOLLOWING TENANCY TYPE: CHOOSE ONE (ONLY): 1 COINT TENAN	lease attach separate sheet of painted in the comment of painted in the comment of painted in the comment of th	desire(s) receive the transfer, it sho	uld be BENEFICIARIES IN THE
n the event all of the above reference eplace them:	ed BENEFICIARIES pre-decease th	e owner/owners, the following COM	MONW/ORIGHT OF SURVIVORSHIP
	CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)
Daniel M. Kelly Same as a Bove 70%	Disting Watson Same as above 30!		
or we, the SOLE OWNER(S) hereby sourposes set forth.	wear and affirm that the foregoin	/ <u>O</u> ng wishes were made as my/our free	e and voluntary act for the
RINT OWNER NAME (A): JUAY	ita Kelly,	PRINT OWNER NAME (B):	
GNATURE OF OWNER (A):	Inita Filly	S GNATURE OF OWNER (B):	
ATE SIGNED BEFORE NOTARY:	114/23 /	DATE SIC NED BEFORE NOTARY:	
<u>WITNES</u>	S DECLARATION — THIS SECTION IS	TO BE ATTES TO AND SIGNED IN 1	THE
Ve, the undersigned witnesses, hereligned by the owner(s) as her, his, or resence of one another. We also do not knowledge that the owner or ownfluence or coercion by any parties,	their voluntary TODI in our pres now hereby swear and affirm th	ence, at the request of her, him or	date referenced above, and them, and while also in the
RINT WITNESS NAME (A): DEVOY)	Hicks -	PRINT WITNESS NAME (B):	La Bloss
GNATURE OF WITNESS (A):	-///h	SIGNATURE OF WITNESS (B)	
ATE SIGNED BEFORE NOTARY: 6-14	-13	DATE SIGNED BEFORE NOTARY	10-14-23
	NOTARY VERIFICA	TION SECTION:	
ATEOF Illinois)ss	DATE NOTARIZED: 5000	14, 2.23
DUNTY OF COOK			
he undersigned, a notary public in and owner or owners, and witnesses, pubscribed on the foregoing instrument livered the foregoing instrument as to the	ersonally known to me to be the	same persons whose names are	Official Seal Brittney Eason Notary Public State of Illinois My Commission Expires 4/25/202
INT NOTARY NAME: British	ur Eason	SIGNATURE OF NOTARY	A. A. C.

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Rev. 2.1.2023