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Doc# 2327657027 Fee \$41.00

**THIS INSTRUMENT WAS PREPARED BY/MAIL TO:**

Kathy M. Gwin  
Steven E Gwin  
22631 Bearclaw Ln Frankfort, IL 60423

RHSP FEE: \$18.00 RPRF FEE: \$1.00

KAREN A. YARBROUGH

COOK COUNTY CLERK

DATE: 10/03/2023 03:25 PM PG: 1 OF 3

**NAME & ADDRESS OF PROPERTY OWNER:**

Kathy M. Gwin  
503 E 169<sup>th</sup> St  
South Holland, IL 60473

**ILLINOIS 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: Kathy M. Gwin, and currently live(s) at the street address of: 503 E. 169<sup>th</sup> St in the City of: South Holland and County of: Cook, in the State of: Illinois with a zip code of: 60473, 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/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: 4-20-2017 as document number: 1711039134 with the proper County Agency in the County of: Cook in the State of Illinois. Furthermore, this TODI is intended to transfer the following real property:

LEGAL DESCRIPTION: CHECK WHICH APPLIES -  WRITTEN BELOW - or  SEE ATTACHED

PROPERTY INDEX NUMBER(PIN): 29-22-411-012-0000

COMMONLY REFERRED TO ADDRESS: 503 E. 169<sup>th</sup> St.  
South Holland, IL 60473

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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DOC ID # 000053109842075

damage to, or destruction of, the Property; (ii) condemnation or other taking of all or any part of the Property; (iii) conveyance in lieu of condemnation; or (iv) misrepresentations of, or omissions as to, the value and/or condition of the Property.

(N) "Mortgage Insurance" means insurance protecting Lender against the nonpayment of, or default on, the Loan.

(O) "Periodic Payment" means the regularly scheduled amount due for (i) principal and interest under the Note, plus (ii) any amounts under Section 3 of this Security Instrument.

(P) "RESPA" means the Real Estate Settlement Procedures Act (12 U.S.C. Section 2601 et seq.) and its implementing regulation, Regulation X (24 C.F.R. Part 3500), as they might be amended from time to time, or any additional or successor legislation or regulation that governs the same subject matter. As used in this Security Instrument, "RESPA" refers to all requirements and restrictions that are imposed in regard to a "federally related mortgage loan" even if the Loan does not qualify as a "federally related mortgage loan" under RESPA.

(Q) "Successor in Interest of Borrower" means any party that has taken title to the Property, whether or not that party has assumed Borrower's obligations under the Note and/or this Security Instrument.

**TRANSFER OF RIGHTS IN THE PROPERTY**

This Security Instrument secures to Lender: (i) the repayment of the Loan, and all renewals, extensions and modifications of the Note; and (ii) the performance of Borrower's covenants and agreements under this Security Instrument and the Note. For this purpose, Borrower does hereby mortgage, grant and convey to MERS (solely as nominee for Lender and Lender's successors and assigns) and to the successors and assigns of MERS, the following described property located in the COUNTY of COOK

[Type of Recording Jurisdiction] [Name of Recording Jurisdiction]  
 LOT 10 IN I.V.I. ADDITION TO SOUTH HOLLAND, BEING A SUBDIVISION OF PART OF THE SOUTHEAST 1/4 OF SECTION 22, TOWNSHIP 36 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Parcel ID Number: 29-22-411-012  
 503 EAST 169TH ST, SOUTH HOLLAND

which currently has the address of

[Street/City]  
 Illinois 60473- ("Property Address"):  
 [Zip Code]

TOGETHER WITH all the improvements now or hereafter erected on the property, and all easements, appurtenances, and fixtures now or hereafter a part of the property. All replacements and additions shall also be covered by this Security Instrument. All of the foregoing is referred to in this Security Instrument as the "Property." Borrower understands and agrees that MERS holds only legal title to the interests granted by Borrower in this Security Instrument, but, if necessary to comply with law or custom, MERS (as nominee for Lender and Lender's successors and assigns) has the right to exercise any or all of those interests, including,

Initials: *J.M.G.*

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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 pre-decease 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)
<u>Kenneth Ester</u>	<u>Steven E. Gwin</u>		

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):  JOINT TENANTS IN COMMON W/ RIGHT OF SURVIVORSHIP -OR-  TENANTS IN COMMON W/O RIGHT OF SURVIVORSHIP

In the event all of the above-referenced BENEFICIARIES pre-decease the owner/owners, the following CONTINGENCY BENEFICIARIES shall replace them:

CONTINGENCY BENEFICIARY (A)	CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)

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): Kathy M. Gwin PRINT OWNER NAME (B): \_\_\_\_\_  
SIGNATURE OF OWNER (A): [Signature] SIGNATURE OF OWNER (B): \_\_\_\_\_  
DATE SIGNED BEFORE NOTARY: \_\_\_\_\_ 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 NOTARY 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.

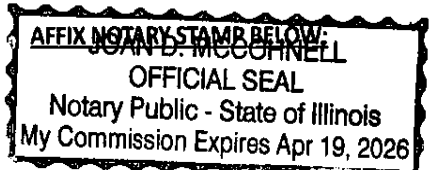
PRINT WITNESS NAME (A): Josephine Harris PRINT WITNESS NAME (B): OCTAVIA FLETCHER  
SIGNATURE OF WITNESS (A): [Signature] SIGNATURE OF WITNESS (B): [Signature]  
DATE SIGNED BEFORE NOTARY: 10/03/2023 DATE SIGNED BEFORE NOTARY: 10/3/2023

**NOTARY VERIFICATION SECTION:**

STATE OF ILLINOIS )  
) SS  
COUNTY OF Cook )

DATE NOTARIZED: 10/3/2023

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 forth.



PRINT NOTARY NAME: JOAN D. MCCONNELL SIGNATURE OF NOTARY: [Signature]