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2329357013

Doc# 2329357013 Fee \$41.00

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

KAREN A. YARBROUGH COOK COUNTY CLERK

DATE: 10/20/2023 11:11 AM PG: 1 OF 3

TRANSFER ON DEATH INSTRUMENT

Owner(s) name and address and taxes to:

1. Dorothy Dearbone, 2107 S. 10th Ave., Maywood, IL 60153

Beneficiary names and addresses:

1. Judith C. Dearbone – 2107 S. 10th Ave., Maywood, IL 60153

Legal Description – THE NORT'13' FEET 6 INCHES OF LOT 50 AND 51 (EXCEPT THE 36 FEET THEREOF) IN CUMMINGS AND FOREMANS REAL ESTATE CORPORATION HARRISON STREET AND NINTH AVENUE SUBDIVISION IN THE SE 1/4 OF SECTION 15, TOWNSHIP 39 NORTH, RANGE 12 EAST OF THE THIRD P.M. ACCORDING TO THE PLAT RECORDED FEBRUARY 9, 1924 AS DOCUMENT 8278599 IN COOK COUNTY, ILLINOIS.

Property Address: 2107 S. 10th Ave., Maywood, IL 60153 Parcel Identification Number: 15-15-431-003-0000

The Owner, being of sound mind and memory, hereby revekes all prior transfer on death instruments for the above-described residential real estate, and conveys and transfers, effective on the death of the Owner, free of any claim of homestead exemption under the laws of the State of Illinois, the above-described residential real estate to the following Designated Beneficiaries in equal shares:

Beneficiaries – Judith C. Dearbone 100%

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IN WITNESS WHEREOF, the said Owner has executed this Transfer on Death Instrument on date first above written.

Word Thy J. Dearbone

STATE OF ILLIPIOIS) ss COUNTY OF COOK)

We, the undersigned witnesses, rereby certify that the above Transfer on Death Instrument was on the date thereof signed and declared by the Owner as his Transfer on Death Instrument in our presence and that we, at his request and in his presence and in the presence of each other, have signed our names as witnesses thereto, relieving to best of our knowledge that the owner executed the Transfer on Death Instrument as his own free and voluntary act, and that at the time of the execution we believed the Owner to be of sound mind and memory.

Finne B Moore WITNESS

WITNESS

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STATE OF ILLINOIS)
) ss
COUNTY OF COOK)

l, the undersigned, a Notary Public in and for the said County, in the State aforesaid, DO HEREBY CERTIFY THAT Owner and witnesses personally known to me to be the same persons whose names are subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that they signed, sealed and delivered the said instrument as their free and voluntary act, for the uses and purposes therein set forth.

GIVEN UNDER my hand and notarial seal this 13 day of 1 closes, 2023.

My commission expires: September 20, 2027

OFFICIAL SEAL
SHUNTE S GOSS
Notary Public, State of Illinois Commission No. 978148 The Clark's Office My Commission Expires