THIS INSTRUMENT WAS PREPARED BY MAIL TO! CIAL COPY

Thomas A. Gilley

1820 Ridge Rd., Ste. 101

Homewood, IL 60430

NAME & ADDRESS OF PROPERTY OWNER:

JANICE JOHNSON

126 CHESTNUT STREET

PARK FOREST, IL 60466

PÜRŞÜANT TO S 755 ILCS 27/1 ET SEO.

THIS TRANSFER ON DEATH INSTRUMENT	(hereinafter referred to as a TODI), which was completed and signed before a
notary public on the following page,	inclemental forested to do d 100 m vision to as a surprise
	CALL TANICE IOHNSON
by the property owner or owners, whose na	rne(s) is/are: JANICE JOHNSON
and currently live(s)at the street address of	126 CHESTNUT STREET
in the City of: PARK FOREST	4
	in the State of: ILLINOIS
	while being of sound mind and disposing memory, do/does now
hereby make(s), declare(s) and publishes	this TODI, stating and accessing to the following: That the above-referenced
	ner(X) of the real estate, under a duly recorded DEED or other CONVEYANCE.
Furthermore, this TODI is intended to trans	
LEGAL DESCRIPTION: CHECK WHICH A	APPLIES – 🔲 WRITTEN BELOW - or - 🔲 SEE ATTACHED
LOT 14 IN BLOCK 2 IN FOREST VIEW	W, BEING A SUBDIVISION OF PART OF THE WEST 1/2 OF THE
	TOWNSHIP 35 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL
MERIDIAN, ACCORDING TO THE PL	AT THEREOF RECORDED SEPTEMBER 5, 1956 AS DOCUMENT
NUMBER 16688375, IN COOK COUN	ITY, ILLINOIS.
PROPERTY INDEX NUMBER(PIN): 32-3	
COMMONLY REFERRED TO ADDRESS:	126 CHESTNUT STREET
	PARK FOREST, IL 60466
the Homestead Exemption laws of the Stardeath of the above-named OWNER , or last	to of Illinois, do(es) now hereby <u>CONVEY</u> and <u>TRANSFER</u> , effective upon the Convert to die of the <u>OWNERS</u> , the above-described real property to the named llowing page in the specified <u>TENANCY TYPE</u> if multiple <u>BENEFICIARIES</u> .

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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Rev. 2.

UNOFFICIAL COPY

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 predecease the OWNER or OWNERS, the following CONTINGENCY BENEFICIARY or BENEFICIARIES should receive the interest outlined in this instrument, in the designated TENANCY TYPE: BENEFICIARY (D) BENEFICIARY (C) **BENEFICIARY (B) BENEFICIARY (A)** KIMBERLY JOHNSON 931 W. ARQUILLA GLENWOOD, IL 60425 If more BENEFICIARIES are desired, please attach separate sheet of paper with the full names and addresses 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): DOINT TENANTS IN COMMON W/ RIGHT OF SURVIVORSHIP-OR- TENANTS IN COMMON W/O RIGHT OF SURVIVORSHIP In the event all of the above refarenced BENEFICIARIES pre-decease the owner/owners, the following CONTINGENCY BENEFICIARIES shall replace them: CONTINGENCY BENEFICIARY (C) CONTINGENCY BENEFICIARY (D) **CONTINGENCY BENEFICIARY (A)** CONTINGENCY BENEFICIARY (B) 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): JANICE JOHNSON PRINT OWNER NAME (B): ___ SIGNATURE OF OWNER-(A): S.GNATURE 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, AT IDAINOTARY PUBLIC: We, the undersigned witnesses, hereby certify that the foregoing TODI was executed and in 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 (B): NANCY E. WARINO PRINT WITNESS NAME (A): JENNIFER L. CARLI

SIGNATURE OF WITNESS (A)		SIGNATURE OF WITNESS (B): Marcine Wareno
DATE SIGNED BEFORE NOTARY: 3/2	4/2024	DATE SIGNED BEFORE NOTARY: 3/21/24
	NOTARY VERI	FICATION SECTION:
STATE OF ILLINOIS)	DATE NOTARIZED: March 21st, 2024
COUNTY OF COOK)SS)	
L the undersigned a notang public in a	and for said County in the Stat	e aforesaid DO HERERY CERTIFY that _ AFFIX NOTARY STAMP BELOW:

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: THOMAS A. GILLEY

SIGNATURE OF NOTARY:

OFFICIAL SEAL

THOMAS A GILLEY
Notary Public, State of Illinois
Commission No. 977132

My Commission Expires August 23, 2024