

THIS INSTRUMENT WAS PREPARED BY:

LYNNE A HARRIS (CLERICAL)

9222 S. PEORIA ST

CHICAGO, ILLINOIS 60620-2725

NAME & ADDRESS OF PROPERTY OWNER:

DAVID L & RUBY J STEWART

8742-44 S THROOP ST

CHICAGO, IL 60620-3433



Doc# 2410711010 Fee \$41.00

ILRHSP FEE:\$18.00 RPRF FEE:\$0.00

KAREN A. YARBROUGH

COOK COUNTY CLERK'S OFFICE

DATE: 4/16/2024 11:24 AM

PAGE: 1 OF 2

ILLINOIS RESIDENTIAL 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: APRIL 12, 2024, by the property owner or owners, whose name(s) is/are: DAVID L &

RUBY J STEWART, and currently live at the street address of: 8742-44 S THROOP ST

in the City of: CHICAGO, and County of: COOK, in the State of: ILLINOIS

with a zip code of: 60620-3433, 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 residential (which must be between 1 - 4 units) real estate, under a duly recorded DEED or other CONVEYANCE INSTRUMENT which was

recorded on the date of: 12/13/1988 as document number: 88574197 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

LOT 10 IN BLOCK 3 IN E.L. BRAINERD'S RESUBDIVISION OF BLOCKS 1 TO 8 AND BLOCK 11 IN W.O. COLE'S SUBDIVISION OF THE EAST 1/2 OF THE NORTH WEST 1/4 (EXCEPT THE SOUTH EAST 1/4 OF THE SOUTH EAST 1/4 OF THE NORTHWEST 1/4) OF SECTION 5, TOWNSHIP 37 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY ILLINOIS

PROPERTY IDENTIFICATION NUMBER(PIN): 25 - 05 - 105 - 024 - 0 0 0 0

COMMONLY REFERRED TO ADDRESS: 8742-44 S THROOP ST

CHICAGO, ILLINOIS 60620-3433

Finally, the owner, or owners, while also being of competent mind and capacity, while waiving and releasing all rights under the Homestead Exemption laws of the State of Illinois, 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 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.

# 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 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:

<u>BENEFICIARY (A)</u>	<u>BENEFICIARY (B)</u>	<u>BENEFICIARY (C)</u>	<u>BENEFICIARY (D)</u>
<u>ARNETTA STEWART ADKINS</u>	<u>DAVID L STEWART JR</u>	<u>JOYCE STEWART WHITE</u>	
<u>810 N Xenophon Ave</u>	<u>8744 S THROOP ST</u>	<u>8648 S THROOP ST</u>	
<u>Tulsa Oklahoma 74127</u>	<u>CHICAGO, IL 60620</u>	<u>CHICAGO, IL 60620</u>	

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): 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:

<u>CONTINGENCY BENEFICIARY (A)</u>	<u>CONTINGENCY BENEFICIARY (B)</u>	<u>CONTINGENCY BENEFICIARY (C)</u>	<u>CONTINGENCY BENEFICIARY (D)</u>

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): DAVID L STEWART SR. PRINT OWNER NAME (B): RUBY J STEWART  
SIGNATURE OF OWNER (A): [Signature] SIGNATURE OF OWNER (B): [Signature]  
DATE SIGNED BEFORE NOTARY: APRIL 12, 2024 DATE SIGNED BEFORE NOTARY: APRIL 12, 2024

**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): JOHN STEWART PRINT WITNESS NAME (B): AMARIS ADKINS  
SIGNATURE OF WITNESS (A): [Signature] SIGNATURE OF WITNESS (B): [Signature]  
DATE SIGNED BEFORE NOTARY: APRIL 12, 2024 DATE SIGNED BEFORE NOTARY: APRIL 12, 2024

### NOTARY VERIFICATION SECTION:

STATE OF ILLINOIS )  
) SS  
COUNTY OF COOK )  
DATE NOTARIZED: APRIL 12, 2024

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: Lynne Anita Harris SIGNATURE OF NOTARY: [Signature]

### AFFIX NOTARY STAMP BELOW:

