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Doc#. 2413727064 Fee: \$59.00 CEDRIC GILES COOK COUNTY CLERK'S OFFICE Date 5/16/2024 11:08 AM Pg: 1 of 2

Rev. 2.1.2023

THIS INSTRUMENT WAS PREPARED BY/MAIL TO:	
The Law Offices of Theodore London & Associates	
1718 E. 87th St.	_
Chicago, IL 60617	
NAME & ADDRESS OF PROPERTY OWNER:	
SYLVIA J. TUNSTILL	_
8136 SOUTH CALUMET AVENUE, 2S	
Chicago, Illinois 60619	_
~~~	
/ 1 -	TRANSFER ON DEATH INSTRUMENT (TODI) TO § 755 ILCS 27/1 ET.SEQ.
notary public on the following page,	erred to as a TODI), which was completed and signed before a
by the accounty owner are owners whose parallel is large	SYTMA J. TUNSTILL

8136 SOUTH CALUMET AVENUE, 2S and currently live(s) at the street address of: in the City of: CHICAGO ILLINO)S and County of: COOK , in the State of: with a zip code of: 60619 _____, 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 folioving: That the above referenced property owner(s), is/ are, the SOLE owner(s) of the real estate, under a duly recorded DEED or other CONVEYANCE. Furthermore, this TODI is intended to transfer the following real property: LEGAL DESCRIPTION: CHECK WHICH APPLIES - WRITTEN BELOW - or - SEE ATTACHED Unit 2-S Together with its undivided percentage interest in the common elements in 8134-36 S. Call met Condominium as delineated and defined in the declaration filed as document no. LR3126743, in the northwest 1/4 of Section 34, Township 38 North, Range 14, east of the third principal meridian, in cook county, Illinois. PROPERTY INDEX NUMBER(PIN): 20-34-116-042-1005 COMMONLY REFERRED TO ADDRESS: 8136 SOUTH CALUMET AVENUE, 2S Chicago, IL 60619 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

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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death of the above-named **OWNER**, or last to die of the **OWNERS**, the above described real property to the named

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TRANSFER ON DEATH INSTRUMENT	T - PAGE 2 (THIS INSTRUMENT IS EXI	EMPT PURSUANT TO § 35 ILCS 200/31	-45, PARA, PROPERTY TAX CODE)	
the above-named OWNER, or last t in the specified TENANCY TYPE if m	to die of the OWNERS, the above-d tultiple BENEFICIARIES are listed. A he following CONTINGENCY BENEF	does now hereby CONVEY and TRAN escribed real property to the name dditionally, in the event the BENEFI FICIARY or BENEFICIARIES should rea	d BENEFICIARY or BENEFICIARIES CIARY or BENEFICIARIES pre-	
BENEFICIARY (A)	BENEFICIARY (B)	BENEFICIARY (C)	BENEFICIARY (D)	
Patricia Tunstill				
If more BENEFICIARIES are dealt wi, BENEFICIARIES. Also, if there are mu FOLLOWING TENANCY TYPE; CHOOSE ONE (ONLY): JOINTTENA	It ple beneficiaries, the OWNER(S)	per with the full names and addres desire(s) receive the transfer, it sho	uld be BENEFICIARIES IN THE	
In the event all of the above-reference replace them:	iced BENEF.CIA.RF3 pre-decease th	e owner/owners, the following COM	NTINGENCY BENEFICIARIES shall	
CONTINGENCY BENEFICIARY (A)	CONTINGENCY BENEFICIARY (B)	CONTINGENCY BENEFICIARY (C)	CONTINGENCY BENEFICIARY (D)	
	- 0/			
I, or we, the SOLE OWNER(S) hereby purposes set forth.	y swear and affirm that the foregoi	wisnes were made as my/our free	e and voluntary act for the	
PRINTOWNER NAME (A); SYLVIA	J. TUNSTILL	PRINT OWNE NAME (B):		
SIGNATURE OF OWNER (A)	heir Junes	SIGNATURE OF OWNER (B):		
DATE SIGNED BEFORE NOTARY: Ma	y 15, 2024	DATE SIGNED BEFORE NO (ARY: _		
WITNESS DECLARATION - THIS SECTION IS TO BE ATTESTED TO AND SIGNED IN THE				
We, the undersigned witnesses, her signed by the owner(s) as her, his, o presence of one another. We also o and knowledge that the owner or o influence or coercion by any partic	reby certify that the foregoing TO or their voluntary TOOI in our pres do now hereby swear and affirm th owners, was or were, at the tinfe o es, including us as witnesses,	sence, at the request of her, him or hat we are signing our names to thi	case referenced above, and white also in the signs arm of with the belief	
PRINT WITNESS NAME (A)	Kisha Bujn D	PRINT WITNESS NAME (B): 2/6	Gada Ja Sing	
SIGNATURE OF WITNESS (A): NAM	KISHA REYNOLDS	SIGNATURE OF WITNESS (B): $\frac{\sqrt{YC}}{2}$	DTONDA LESURE	
DATE SIGNED BEFORE NOTARY: May	/ 15, 2024	DATE SIGNED BEFORE NOTARY: MA	AY 15, 2024	
	NOTARY VERIFICA	ATION SECTION:		
STATE OF Illinois		DATE NOTARIZED:		
COUNTY OF COOK	)ss )			
, the undersigned, a notary public in the owner or owners, and witnesses subscribed on the foregoing instrume felivered the foregoing instrument a orth.	, personally known to me to be the ent, appeared before me on the be	same persons whose names are Now date and signed, sealed and	AFFIX NOTARY STAMP BELOW:	
PRINT NOTARY NAME: Theodore	London	SIGNATURE OF NOTARY:	44-	
ą	age 2 of 2 - Transfer on Death Inst	trument cookcountyclerif.gov	OFFICIAL SEAL Rev. 2.1.202	

THEODORE LONDON NOTARY PUBLIC, STATE OF ILLINOIS

MY COMMISSION EXPIRES: 3/28/2025