

# UNOFFICIAL COPY

## PREPARED BY

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## PROPERTY OWNER INFORMATION

MS. BARBARA A. WYNNE  
8919 S. LOWE AVENUE  
CHICAGO, IL 60620

# TRANSFER ON DEATH INSTRUMENT (TODI)

PURSUANT TO §755 ILCS 27/1 ET. SEQ. (ILLINOIS RESIDENTIAL REAL PROPERTY TRANSFER ON DEATH INSTRUMENT)

THIS **TRANSFER ON DEATH INSTRUMENT** (hereinafter referred to as "TODI"), which was executed on this

9TH day of AUGUST in the year 2024, by BARBARA A. WYNNE

DAY OF THE MONTH MONTH

YEAR

NAME (S) OF PROPERTY OWNER(S)

NAME (S) OF PROPERTY OWNER(S)

who resides at 8919 S. LOWE AVENUE CHICAGO, IL 60620

being of sound mind and disposing memory, do hereby make, declare and publish this TODI stating as follows:

That the above referenced property owner(s) is/are the **SOLE** owner(s) of residential real estate under a duly recorded

**DEED**, recorded 12/23/1999 as document 05192143 in the County of COOK,

DATE DEED RECORDED

DOCUMENT NUMBER

COUNTY

## WRITE LEGAL DESCRIPTION (BELOW OR ATTACH)

LOT 39 IN BLOCK 21 IN SISSON AND NEWMAN'S SOUTH ENGLEWOOD SUBDIVISION IN THE NORTHWEST 1/4 OF SECTION 4, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

## WITH THE PROPERTY IDENTIFICATION NUMBER (PIN) OF:

2 5 - 0 4 - 1 1 9 - 0 0 8 - 0 0 0

## PROPERTY COMMONLY REFERRED TO ADDRESS:

8919 S. LOWE AVENUE, CHICAGO, IL 60620

The owner(s), being of competent mind and capacity, and waiving and releasing all rights under the Homestead Exemption of the State of Illinois, do hereby convey and transfer, effective on death of the Owner last to die, 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 **CONTINGENT BENEFICIARY** or **BENEFICIARIES** should receive the interest outlined in this instrument, in the designated **TENANCY TYPE**.

## BENEFICIARY DESIGNATION: ATTACH ADDITIONAL AS NEEDED

1

2

3

Name: TIFFANY WYNNE

Address: 12144 ANN STREET

City/State: BLUE ISLAND, IL 60406

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## TRANSFER ON DEATH INSTRUMENT – PAGE 2 (TRANSFER TAX STAMP, EXEMPTION, WITNESS & NOTARY)

If there are multiple beneficiaries, the **OWNER** or **OWNERS** desires that the transfer be to those beneficiaries in the following Tenancy Type: Choose one only: **JOINT TENANTS IN COMMON WITH RIGHT OF SURVIVORSHIP**  **OR** **TENANTS IN COMMON WITHOUT RIGHT OF SURVIVORSHIP**

In the event all of the above-referenced **BENEFICIARIES** pre-decease the owner/owners, the following **CONTINGENT BENEFICIARIES** shall replace them.

**CONTINGENCY BENEFICIARY DESIGNATION: ATTACH ADDITIONAL AS NEEDED**

<b>1</b>	<b>2</b>	<b>3</b>
Name: <u>PERRY ALLEN</u>	_____	_____
Address: <u>8113 S. CRANDON AVENUE</u>	_____	_____
City/State: <u>CHICAGO, IL 60617</u>	_____	_____

**NAME OF OWNER(S)**

**BARBARA A. WYNNE**

This Transfer is Exempt under provisions of 35 ILCS 200/31-45. Paragraph, Illinois Real Estate Transfer Tax Law

AUGUST 9, 2024  
DATE DOCUMENT EXECUTED

*Barbara Wynne*  
SIGNATURE OF OWNER OR REPRESENTATIVE

\_\_\_\_\_  
DATE DOCUMENT EXECUTED

\_\_\_\_\_  
SIGNATURE OF OWNER OR REPRESENTATIVE

**WITNESS DECLARATION**

We, the undersigned witnesses, hereby certify that the above Transfer on Death Instrument was on the date thereof signed and declared by the Owner(s) as his/her/their Transfer on Death Instrument in our presence and that we, at his/her/their request and in his/her/their presence and in the presence of each other, have signed our names as witnesses thereto, believing to the best of our knowledge that the Owner(s) was/were at the time of signing of sound mind and memory, and under no undue influence.

TANYA WILMOT  
WITNESS 1 PRINTED NAME

*Tanya Wilmot*  
WITNESS 1 SIGNATURE

5536 N. Michigan, Chicago, IL 60637  
WITNESS 1 ADDRESS

DEANDRE BAKER  
WITNESS 2 PRINTED NAME

*Deandre Baker*  
WITNESS 2 SIGNATURE

9947 S. Yale Avenue, Chicago IL 60628  
WITNESS 2 ADDRESS

**NOTARY VERIFICATION**

STATE OF ILLINOIS        )  
  ) SS  
COUNTY OF COOK        )

I, the undersigned, a notary public in and for County, in the State aforesaid, **DO HEREBY CERTIFY** that Owner(s) and witnesses personally known to me to be the same persons whose names are subscribed on 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 9TH day AUGUST, 2024.

NOTARY PUBLIC SIGNATURE: *Benjamin E. Starks, Sr.*

NOTARY PUBLIC STAMP:

