THIS INSTRUVIENT WAS PREPARED BY/W	MAIL 10:	
NAME & ADDRESS OF PROPERTY OWNER		
	RTY TRANSFER ON DEATH INSTRUMENT (T JANT TO § 755 ILCS 27/1 ET SEQ.	ODI)
notary public on the following date:whose name(s) is/are:	reinafter referred to as a TODI), which was comple , by the p in the City of:	property owner or owners, , and currently live(s)
and County of:, while be declare(s) and publishes this TODI, stating and are, the SOLE owner(s) of the real property, unrecorded on the date of:	eing of sound mind and disposing memory, do/dod attesting to the following: That the above-reference under a duly recorded DEED or other CONVEYANCE as document number: in the State of Illinois.	with a with a with a pes now hereby make(s), ced property owner(s), is/ INSTRUMENT which was with the
PROPERTY INDEX NUMBER(PIN):	PLIES - WRITTEN BELOW - or - SEE	E ATTACHED
the Homestead Exemption laws of the State of death of the above-named OWNER , or last to	petent mind and capacity, while waiving and releas of Illinois, do(es) now hereby <u>CONVEY</u> and <u>TRANSFE</u> o die of the <u>OWNERS</u> , the above-described real proping page in the specified <u>TENANCY TYPE</u> if multiple	ER, effective upon the perty to the named

SPECIAL NOTICE: This form is provided compliments of COOK COUNTY CLERK CEDRIC GILES, 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.

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 (A) **BENEFICIARY (B)** BENEFICIARY (C) BENEFICIARY (D) If more BENEFICIARIES are desired, please attach separate sheet of paper with the full names 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: CONTINGENCY BENEFICIARY (A) CONTINGENCY BENEFICIARY (B) CONTINGENCY BENEFICIARY (C) **CONTINGENCY BENEFICIARY (D)** 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): PRINT OWNER NAME (B): _____ SIGNATURE OF OWNER (A): _____ SIGNATURE 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, 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): _____ PRINT WITNESS NAME (B): _____ SIGNATURE OF WITNESS (A): _____ SIGNATURE OF WITNESS (B): _____ DATE SIGNED BEFORE NOTARY: DATE SIGNED BEFORE NOTARY: **NOTARY VERIFICATION SECTION:** DATE NOTARIZED: 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 SIGNATURE OF NOTARY: PRINT NOTARY NAME: