

Prepared by:

When recorded, mail to:

Mail tax bill:

Illinois Transfer on Death Instrument

This TRANSFER ON DEATH INSTRUMENT is an exempt transaction under the provisions of 35 ILCS 200/31-45, paragraph (e) of the Illinois Real Estate Transfer Tax Law.

I/we, _____ (Owner(s)), being of sound mind and legal capacity, hereby convey, effective upon my/our death, the following real property located in Illinois:

I/we designate the following beneficiary:

Beneficiary: _____ **Relationship:** _____

Address: _____

If the beneficiary does not survive me, I/we designate the following alternate beneficiary:

Beneficiary: _____ **Relationship:** _____

Address: _____

I reserve the right to revoke or change this transfer on death deed at any time, and the transfer to the beneficiary shall not occur until my death.

Signature: _____

Grantor Printed Name: _____ **Date:** _____

Signature: _____

Grantor Printed Name: _____ **Date:** _____

The Owner(s) has/have executed this instrument before two witnesses identified below. The witnesses attest that the owner's execution is their own free and voluntary act, and at the time of this execution, the owner(s) is/are believed to be of sound mind and memory.

Witness Signature: _____

Printed Name: _____ **Date:** _____

Witness Signature: _____

Printed Name: _____ **Date:** _____

NOTARY ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of Illinois }

County of _____ }

On _____, 20____, before me, _____, personally appeared _____ who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed within the Transfer on Death Deed and acknowledged to me that they executed the same in their authorized capacity, and that by their signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the state of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Notary Public: _____

Print Name: _____

My Commission Expires: _____, 20____