

NOTICE OF DEATH AFFIDAVIT
AND ACCEPTANCE OF TRANSFER
ON DEATH INSTRUMENT

Return Document to:

Prepared by:

Send subsequent Tax bill to:

The undersigned beneficiary or beneficiaries, being duly sworn on oath, state as follows:

That _____
died on _____, 20____, a resident of _____ County,
State of Illinois, owning real estate legally described below:

Property Address: _____

Property Identification Number (PIN): _____

Legal Description:

That the Transfer on Death Instrument is dated _____ and recorded as
Document No. _____ in the Office of the Recorder for Grundy County, Illinois.

That the undersigned whose names and addresses appear below are all beneficiaries entitled to
receive under the Transfer on Death Instrument:

Name	Address	Share
_____	_____	_____
_____	_____	_____
_____	_____	_____

In witness whereof, the undersigned beneficiaries hereby accept the transfer of residential real estate under the Transfer on Death Instrument this _____ day of _____, 20_____.

_____ (seal)	_____ (seal)
--------------	--------------

_____	_____
Printed Name	Printed Name

_____ (seal)	_____ (seal)
--------------	--------------

_____	_____
Printed Name	Printed Name

_____ (seal)	_____ (seal)
--------------	--------------

_____	_____
Printed Name	Printed Name

STATE OF ILLINOIS

COUNTY OF _____

I, the undersigned, a Notary Public in and for the State aforesaid, DO HEREBY CERTIFY THAT

_____ Personally known to me to be the same person or persons whose name or names are subscribed to the foregoing instrument, appeared before me this day in person and swore on oath to the above foregoing affidavit. Signed and sworn to before me this _____ day of _____, A.D. 20_____.

My commission expires on _____, 20_____. Affix Notary Stamp below

_____ (seal)

(Notary Public)

EXEMPT under provisions of Paragraph _____ Section 31-45, Property Tax code.

_____ Signature

_____ Date