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2011 018274

2011 MAR 30 AM 10:01

Mail Tax Bills To:  
Barbara M. Eldridge (Grantor)  
3100 Crabapple Lane  
Hobart, Indiana 46342

Return To:  
Barbara M. Eldridge (Grantee)  
3100 Crabapple Lane  
Hobart, Indiana 46342

**TRANSFER ON DEATH DEED**

This Indenture Witnesseth that Barbara M. Eldridge, (Grantor) of Lake County, Indiana, as a gift and for no consideration, conveys and quit claims to Barbara M. Eldridge, Grantee Transfer on Death to Douglas Eldridge, Kelly Eldridge, Leslie Eldridge and the "Irrevocable Special Needs Trust f/b/o Jamie Eldridge" (Primary Beneficiaries), as tenants in common and not as joint tenants with rights of survivorship, any interest Grantor owns in the following described real estate in Lake County, Indiana:

**LEGAL DESCRIPTION:**

Lot 185 in Crestwood Trace, in the City of Hobart, as per plat thereof, recorded in Plat Book 42 page 29, and as amended by Certificate of Correction recorded September 25, 1973 as Document No. 222192, in Lake County, Indiana, commonly known as 3100 Crabapple Lane, Hobart, Indiana 46342.

Parcel Number: 17-248-185

Common Address: 3100 Crabapple Lane, Hobart, Indiana 46342

If a Primary Beneficiary does not survive the Grantor / Owner, then the transfer on death to such Primary Beneficiary shall be distributed to Primary Beneficiary's Lineal Descendants Per Stirpes ("LDPS") as defined by the Transfer on Death Property Act for Indiana.

In Witness Whereof, Barbara M. Eldridge has executed this instrument this 14<sup>th</sup> day of March, 2011.

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

*Barbara M. Eldridge*  
Barbara M. Eldridge, Grantor

MAR 24 2011

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

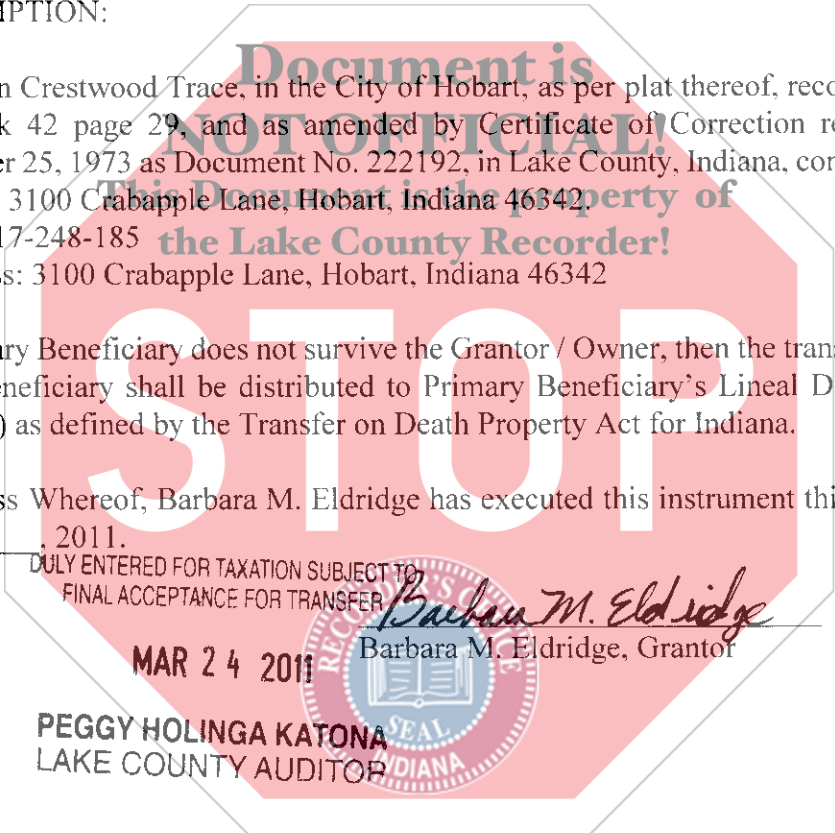
026057

AMOUNT \$ 18<sup>00</sup>  
CASH \_\_\_\_\_ CHARGE FN  
CHECK # \_\_\_\_\_  
OVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK AS

Return: See above

**Fidelity National Title recorded this document as an accommodation. Fidelity does not guarantee the document or the title of the real estate affected.**

FIDELITY NATIONAL TITLE  
INSURANCE COMPANY  
Crown Point, Indiana



STATE OF INDIANA )  
 ) SS:  
COUNTY OF PORTER )

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared Barbara M. Eldridge and acknowledged the execution of the foregoing document this 14 day of March, 2011.

My Commission Expires:  
May 13, 2017

  
\_\_\_\_\_  
Andrew Lucas, Notary Public

My County of Residence:  
Porter

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

  
\_\_\_\_\_  
Andrew Lucas

This Instrument Prepared By: Andrew Lucas, Attorney at Law, 6 N. Michigan Ave., Valparaiso, IN 46383, at the specific request of the owner or the owner's representatives and is based solely on information supplied by one or more of those parties and without examination for accuracy. This preparer assumes no liability for any errors, inaccuracy or omissions in this instrument resulting from the information provided. The parties accept this disclaimer by the owner's execution of this document.

