

Mail Tax Bills To:
William J. Kalbac, Grantee
2143 Schilling Drive
Schererville, Indiana 46375

Parcel No. 45-11-17-329-002.000-036

TRANSFER ON DEATH DEED

THIS INDENTURE WITNESSETH THAT:
of Lake County in the State of Indiana

WILLIAM J. KALBAC

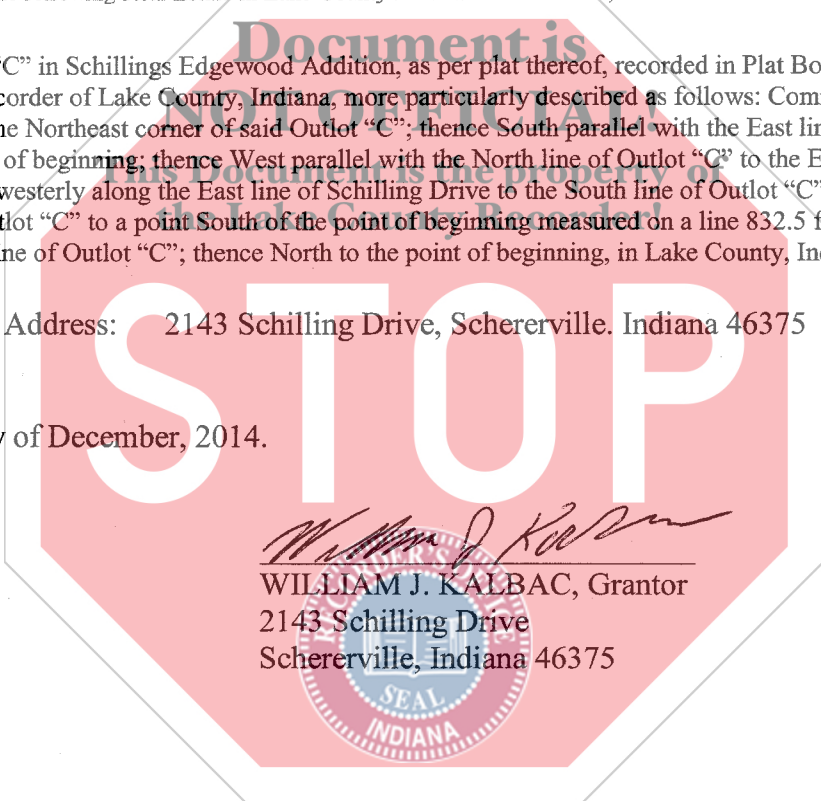
CONVEYS AND QUIT CLAIMS TO:

WILLIAM J. KALBAC, Transfer on Death to Jason W. Kalbac
for no consideration, the following Real Estate in Lake County in the State of Indiana, to wit:

That part of Outlot "C" in Schillings Edgewood Addition, as per plat thereof, recorded in Plat Book 28, page 5, in the Office of the Recorder of Lake County, Indiana, more particularly described as follows: Commencing at a point 832.5 feet West of the Northeast corner of said Outlot "C"; thence South parallel with the East line of Outlot "C" 150 feet to the point of beginning; thence West parallel with the North line of Outlot "C" to the East line of Schilling Drive; thence Southwesterly along the East line of Schilling Drive to the South line of Outlot "C"; thence East along the South line of Outlot "C" to a point South of the point of beginning measured on a line 832.5 feet West of an parallel to the East line of Outlot "C"; thence North to the point of beginning, in Lake County, Indiana.

Common Address: 2143 Schilling Drive, Schererville, Indiana 46375

Dated this 5th day of December, 2014.



William J. Kalbac
WILLIAM J. KALBAC, Grantor
2143 Schilling Drive
Schererville, Indiana 46375

2014 077983

STATE OF INDIANA
LAKE COUNTY
RECORDER
2014 DEC 05 PM 6:45

FILED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER

DEC 09 2014

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

28594

\$19

CS

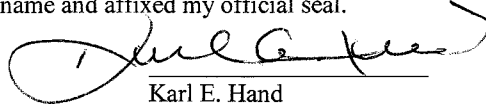
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STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Before me, the undersigned, a Notary Public in and for said County and State, this 5th day of December, 2014, personally appeared: William J. Kalbac and acknowledged the execution of the foregoing Transfer on Death Deed.

In witness whereof, I have hereunto subscribed my name and affixed my official seal.


Karl E. Hand

My Commission Expires: 11/10/17
County of Residence: Lake

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


KARL E. HAND



THIS INSTRUMENT PREPARED BY:
KARL E. HAND, Attorney at Law
1000 Eagle Ridge Drive, Suite F, Schererville, Indiana 46375

