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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 082544

2015 DEC 10 PM 2:01

MICHAEL B. BROWN
RECORDER

TRANSFER ON DEATH DEED

CAUTION: THIS DEED MUST BE RECORDED PRIOR TO THE DEATH OF THE GRANTOR IN ORDER TO BE EFFECTIVE

I, Orrin K. Walley, revoke all my previous transfer on death deeds affecting the real estate identified in this Transfer On Death Deed.

Orrin K. Walley, as grantor, hereby designate Scott Allen Walley, Carlsbad, New Mexico, as the grantee-beneficiaries of this Transfer On Death Deed.

Grantor, transfers, sells and conveys on grantor's death to the grantee-beneficiaries, for the sum of Ten Dollars (\$10.00) the following described real property located in the County of Lake, State of Indiana:

Lot 70, Lakes of the Four Seasons, Unit No. 1, as shown on plat in Plat Book 37, page 63, in the Recorder's Office in Lake County, Indiana.

Parcel Number: 45-17-09-277-010.000-044

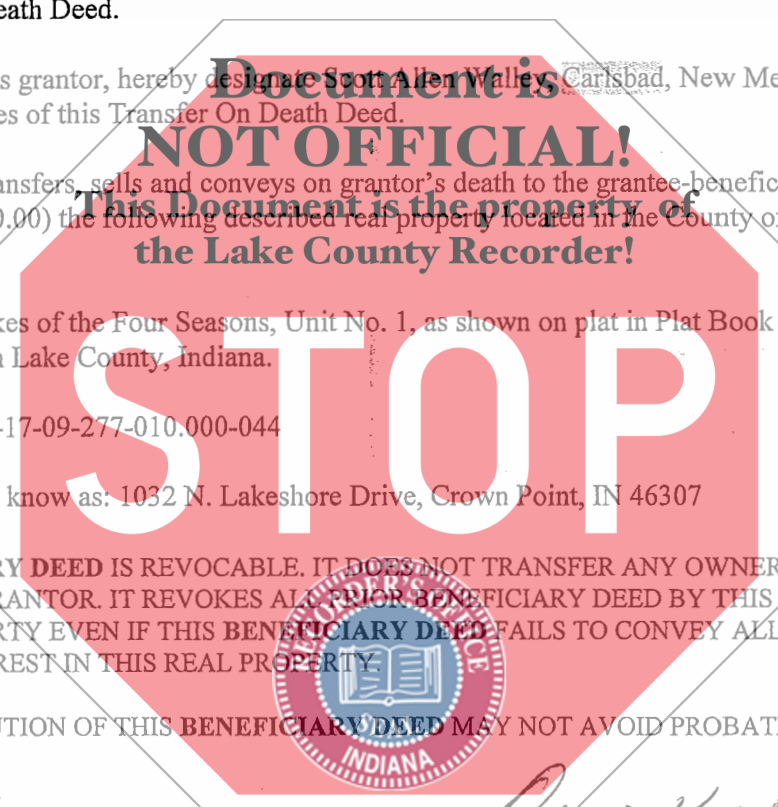
→ Commonly know as: 1032 N. Lakeshore Drive, Crown Point, IN 46307

THIS BENEFICIARY DEED IS REVOCABLE. IT DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR. IT REVOKES ALL PRIOR BENEFICIARY DEED BY THIS GRANTOR FOR THE REAL PROPERTY EVEN IF THIS BENEFICIARY DEED FAILS TO CONVEY ALL OF THE GRANTOR'S INTEREST IN THIS REAL PROPERTY.

WARNING; EXECUTION OF THIS BENEFICIARY DEED MAY NOT AVOID PROBATE.

12-7-15
Date

Orrin K. Walley
Grantor



DULY ENTERED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER
DEC 10 2015
017510

Page 1 of 3
JOHN E. PETALAS
LAKE COUNTY AUDITOR

NO SALES DISCLOSURE NEEDED

Approved Assessor's Office
By: [Signature]

AMOUNT \$ 20
CASH CHARGE _____
CHECK # _____
OVERAGE _____
COPY _____
NON-COM _____
CLERK [Signature]

STATE OF INDIANA)
)
) SS:
COUNTY OF LAKE)

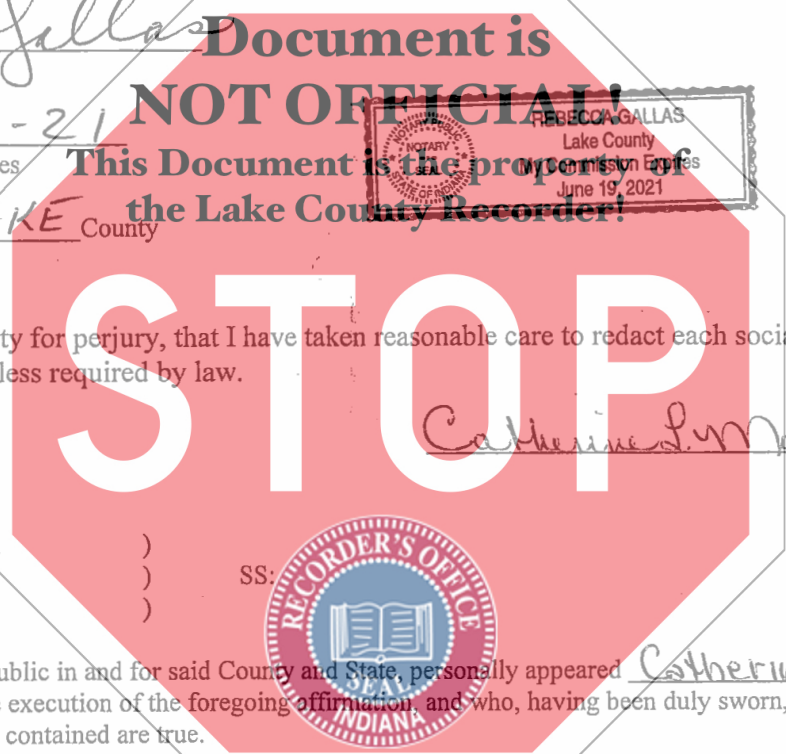
Before me, the undersigned, a Notary Public, in and for said County and State, subscribed and sworn to before me, this 7th day of December, 2015.

IN WITNESS WHEREOF, I have subscribed my name and affixed my official seal.

Rebecca Gallas
Notary Public

6-19-21
My Commission Expires

Resident of LAKE County



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

Catherine L. Molnar-Boncela

STATE OF INDIANA)
)
) SS:
COUNTY OF LAKE)

Before me, a Notary Public in and for said County and State, personally appeared Catherine L. Molnar-Boncela who acknowledged the execution of the foregoing affirmation, and who, having been duly sworn, stated that any representations therein contained are true.

Witness my hand and Notarial Seal this 7th day of December, 2015.

Theresa S. Mackenthun
Signature of Notary Public

Theresa S. Mackenthun
Printed Name



My commission expires: 10/29/2022

Resident of Lake County, Indiana

(Note to Assessor and Treasurer: The foregoing addresses are for identification purposes only, all notices and tax statements should continue to be sent to Monica F. Stillman).

This form prepared by: Catherine Molnar-Boncela, 433 W. 84th Drive, Merrillville, IN 46410

