

2

**REVOCATION OF BENEIFICIARY DESIGNATION**

The undersigned being first duly sworn upon her oath states:

- 1. That your Affiant is the owner of a parcel of real estate commonly known as 244 North Liberty, Lowell, Indiana, and more particularly described as follows:

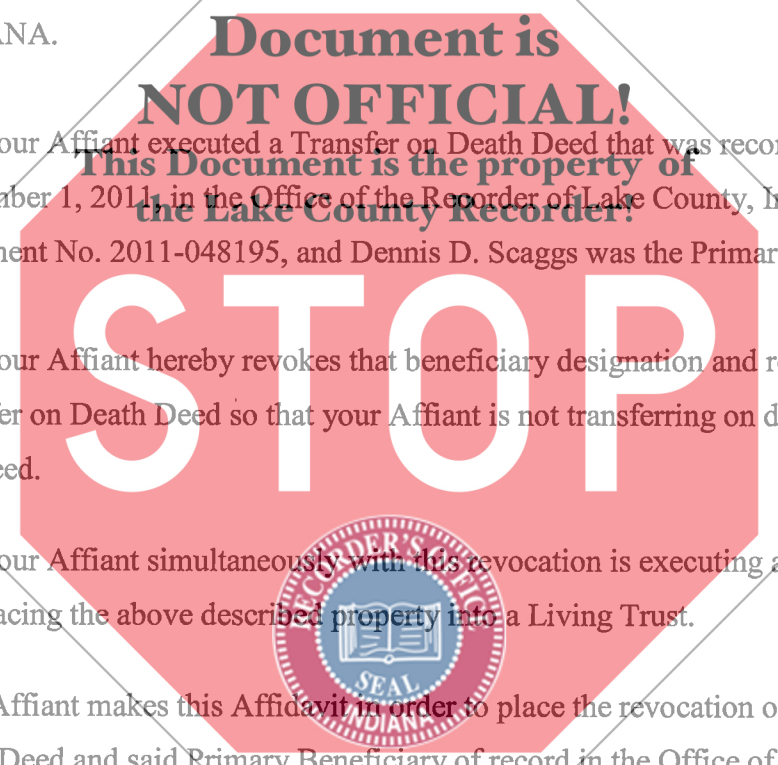
LOT 1 OF THE PLAT OF CORRECTION OF ZUNICA'S 2ND ADDITION TO THE TOWN OF LOWELL, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 75, PAGE 44, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

- 2. That your Affiant executed a Transfer on Death Deed that was recorded on September 1, 2011, in the Office of the Recorder of Lake County, Indiana, as Document No. 2011-048195, and Dennis D. Scaggs was the Primary Beneficiary.

That your Affiant hereby revokes that beneficiary designation and revokes the Transfer on Death Deed so that your Affiant is not transferring on death pursuant to said deed.

- 4. That your Affiant simultaneously with this revocation is executing a Trustee's Deed and placing the above described property into a Living Trust.

- 5. Your Affiant makes this Affidavit in order to place the revocation of said Transfer on Death Deed and said Primary Beneficiary of record in the Office of the Recorder of Lake County, Indiana.



STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
2016 MAR 28 AM 9:54  
MICHAEL B. BROWIN  
RECORDER

2016 018980

MAR 28 2016

JOHN E. PETALAS  
LAKE COUNTY AUDITOR

Dated this 23<sup>d</sup> day of March, 2016.

AMOUNT \$ 15  
 CASH \_\_\_\_\_ CHARGE \_\_\_\_\_  
 CHECK # 2769  
 OVERAGE \_\_\_\_\_  
 COPY \_\_\_\_\_  
 NON-COM   
 CLERK MB

107  
0

*Shirley L. Scaggs*  
 Shirley L. Scaggs

SALES DISCLOSURE NEEDED

Approved Assessor's Office

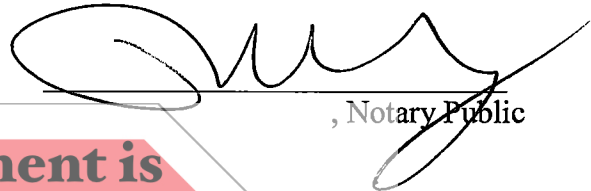
21355

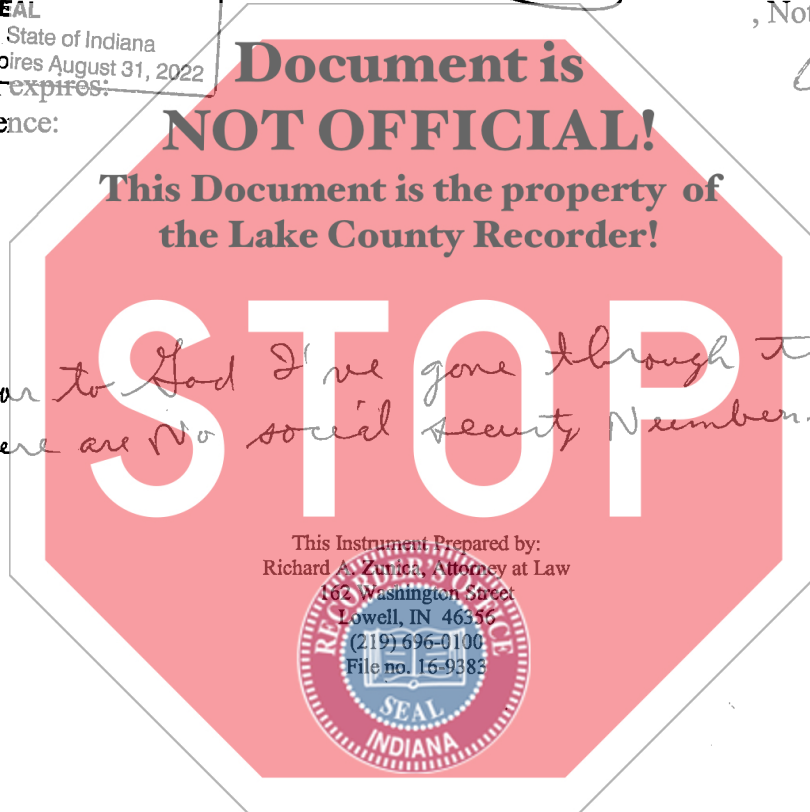
By *[Signature]*

State of Indiana )  
 )SS:  
County of Lake )

Before me, the undersigned, a Notary Public in and for said County and State, this 23rd day of March, 2016, personally appeared: Shirley L. Scaggs, and acknowledged the execution of the foregoing revocation of transfer on death deed and being first duly sworn upon her oath and under the penalties for perjury states that the above representations are true and correct and are made with my full knowledge and intention. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

RICHARD A. ZUNICA  
NOTARY PUBLIC  
SEAL  
Porter County, State of Indiana  
My Commission Expires August 31, 2022  
My commission expires:  
County of residence:

  
, Notary Public



*I swear to God I've gone through this document  
I there are no social security number.* RICHARD ZUNICA

This Instrument Prepared by:  
Richard A. Zunica, Attorney at Law  
162 Washington Street  
Lowell, IN 46356  
(219) 696-0100  
File no. 16-9388