

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2017 070455

2017 OCT 18 AM 10:57

MICHAEL B. BROWN  
RECORDER

2

Mail Tax Bills To:  
Deborah A. Wegman  
2616 Knollwood Dr.  
Crown Point, IN 46307

Return To: Deborah A. Wegman  
2616 Knollwood Dr.  
Crown Point, IN 46307

**TRANSFER ON DEATH DEED**

*This Indenture Witnesseth* that **DEBORAH A. WEGMAN**, of Lake County, Indiana, as a gift and for no consideration, conveys and warrants to **DEBORAH A. WEGMAN**, 2616 Knollwood Dr., Crown Point, Lake County, Indiana 46307, **Transfer on Death** to **HENRY A. WEGMAN, JR.**, any interest she owns in the following described real estate in Lake County, Indiana:

LOT 11, BUILDING NO. 3, PARCEL 1, FOUR SEASONS TOWN HOUSES, TRACT 106, IN LAKES OF THE FOUR SEASONS, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 49 PAGE 139 AND AS AMENDED BY AMENDED PLAT AS SHOWN IN PLAT BOOK 51 PAGE 44, BEING A PART OF TRACT 106, LAKES OF THE FOUR SEASONS, UNIT NO. 1, AS SHOWN IN PLAT BOOK 37, PAGE 63, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Parcel Number: 45-17-09-289-008.000-044

Common Address: 2616 Knollwood Dr., Crown Point, IN 46307

If **HENRY A. WEGMAN, JR.** does not survive **DEBORAH A. WEGMAN**, then his share of this Transfer on Death transfer shall be distributed to his lineal descendants, per stirpes.

DULY ENTERED FOR TAXATION SUBJECT  
FINAL ACCEPTANCE FOR TRANSFER

OCT 18 2017

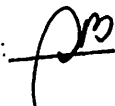
JOHN E. PETALAS  
LAKE COUNTY AUDITOR

028046

25.-  
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**NO SALES DISCLOSURE NEEDED**

Approved Assessor's Office

By: 

In Witness Whereof, **DEBORAH A. WEGMAN** has executed this instrument this 18<sup>th</sup> day of October, 2017.

*Deborah A. Wegman*  
**DEBORAH A. WEGMAN**

STATE OF INDIANA )  
 )  
COUNTY OF LAKE )

Before me, the undersigned, a Notary Public in and for said County and State, this 18 day of October, 2017, personally appeared **DEBORAH A. WEGMAN**, and acknowledged her execution of the foregoing Transfer on Death Deed as her voluntary act and deed.

WITNESS MY HAND AND SEAL.

My Commission Expires: **BARBARA L. JANKE**  
February 2, 2023 Notary Public, State of Indiana  
Lake County  
My Commission Expires  
February 02, 2023

*Barbara L. Janke*  
Barbara L. Janke, Notary Public  
Resident of Lake County, Indiana

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.



*James W. Martin*

This Instrument Prepared By: James W. Martin, Attorney at Law, 8585 Broadway, Suite 660, Merrillville, Indiana 46410, (219) 769-3760, 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.