

Prepared By:
Michael A Faulkner
8720 SCHILLTON DR
SAINT JOHN, IN 46373-9355

2020-068232

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
MICHAEL B BROWN
RECORDER

2020 Sep 25 10:23 AM

After Recording Return To:
Michael A Faulkner
8720 SCHILLTON DR
SAINT JOHN, IN 46373-9355

SPACE ABOVE THIS LINE FOR RECORDER'S USE

TRANSFER ON DEATH DEED

**THIS DEED MUST BE RECORDED PRIOR TO THE DEATH OF THE GRANTOR
IN ORDER TO BE EFFECTIVE.**

KNOW ALL PERSONS BY THESE PRESENTS THAT:

I, Joyce R Faulkner, a single person, (herein referred to as "Grantor"), does hereby convey unto Grantee(s) as designated below, (herein referred to as "Grantee"), effective upon my death, the following described real property located in Munster, in the County of Lake, State of Indiana:

Legal Description:

STONE RIDGE CONDOMINIUMS UNIT D1

If the Grantee Beneficiary predeceases me, the conveyance to that Grantee Beneficiary shall:

Become null and void.

Grantee(s):
Michael A Faulkner
8720 Schillton Drive
Saint John, Indiana 46373

Richard Faulkner
198 Highpoint Trail
Dyer, Indiana 46311

FILED 053597
SEP 25 2020
JOHN E. PETALAS
LAKE COUNTY AUDITOR



Handwritten initials: JRF

Kathleen Knox
17613 Alta Court
Lockport, Illinois 60441

Mail Tax Statements To:

Michael A Faulkner
8720 SCHILLTON DR
SAINT JOHN, Indiana 46373-9355

[SIGNATURE PAGE FOLLOWS]

Grantor Acknowledgement

Grantor Signature:

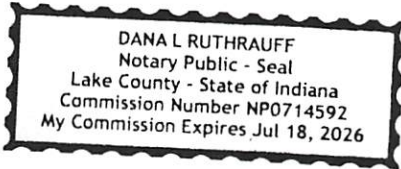
DATED: September 10, 2020

Joyce R. Faulkner

Joyce R Faulkner
415 Old Stone Road #D1
Munster, Indiana 46321

STATE OF INDIANA, COUNTY OF LAKE, ss:

This instrument was acknowledged before me on this 10th day of September, 2020 by
Joyce R Faulkner.



Dana L. Ruthrauff
Notary Public

Title (and Rank)

My commission expires: July 18, 2026



CERTIFICATE OF PROOF

WITNESS to the signature (s) on the foregoing instrument to which this Proof is attached.

[Handwritten Signature]
Witness Signature

Michael Faulkner
Witness Printed Name

PROOF:

STATE OF Indiana

COUNTY OF Lake

Before me a Notary Public in and for said County and State, Dated on 9/25/2020, personally appeared the above-named WITNESS to the foregoing instrument, who, being by me duly sworn, did depose and say that he/she knows WITNESS-Michael A Faulkner to be the individual(s) described in and who executed the foregoing instrument: that said WITNESS was present and saw said GRANTOR(S)- _____ execute the same: and the said WITNESS at same time subscribed his/her name as a witness thereto

[Handwritten Signature]
NOTARY PUBLIC SIGNATURE

Kire Marinceski
NOTARY PRINTED NAME

Notary Name exactly as Commission
Notary Public- State of Indiana
Seal



My Commission Expires: April 8, 2028
Commission No: 0726218