NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2022-000555

1:65 PM 2022 Jan 7

TRANSFER ON DEATH BENEFICIARY AFFIDAVIT

STATE OF INDIANA
COUNTY OF LAKE

JAMES MICHAEL BOLAND, JR

, being first duly sworn, upon oath deposes and s ys:

JAMES MICHAEL BOLAND
 ("Owner") died on NOVEMBER 11, 2021
resident of LAKE County, Indiana, (a certified copy of the owner's death certificate is attached
as Exhibit A) owning at death an interest in the following described real estate:
The Southwest Quarter of Section 20 Township 34 North, Range 8 West of the 2nd Principal Meridian

Property address: 12913 CHASE STREET, CROWN POINT, INDIANA 46307 Parcel ID: 45-16-20-301-002.000-041

- 2. On December 14, 2016 , the owner signed a transfer on death deed transferring, on the owner's dea h, the owner's interest, if any, in the real estate described above. This document was recorded on December 16, 2015 in the office of the recorder of Lake County, Indiana as 2016 085504
- 3. The designated beneficiary or beneficiaries in the transfer on death deed who did not survive the owner are (a certified copy of the death certificate for each is attached: Does Not Apply
- 4. The designated beneficiary or beneficiaries in the transfer on death deed who survive the owner or are in existence at the owner's death are:

James Michael Boland, Jr, son of owner, 12913 Chase Street, Crown Point, Indiana 46307, as sole owner

- 5. This affidavit shall be recorded in the recorder's office of Lake County, Indiana, and presented to the auditor of said county for appropriate entering for taxation.
- 6. The purpose of this affidavit is to comply with the requirements of IC 32-17-14-26(b)(20) to transfer on de th the owner's interest in the real estate described above to the transfer on death deed beneficiary.

AFFIRMED UNDER PENALTIES FOR PERJURY THAT THE FOREGOING REPRESENTATIONS ARE TRUE

FILED

JAN 07 2022

JOHN E PETALAS

AKE COUNTY AUDITOR



NOT AN OFFICIAL DOCUMENT

Dated this	day of	, 20	Affiant's signature
			JAMES MICHAEL BOLAND, JR Print name
			riint name
STATE OF IT) SS :	
who acknowle	nally appeared Ja	on of the foregoing in	nd state, and a resident of
Witness my has Notary signate Print name:My commission	Salsuns	a) this day o	DOUGLAS HACHTERHOS W Commission Explore Following & 202 Commission Explore
	-	219112	Lake County
in this docume	the penalties for ent, unless require	perjury, that I have to d by law.	aken reasonable care to redact each Social Security nı mber
This document James Michael	was prepared and Boland Jr	d affirmation made by	- Pold
12913 Chase S			preparer's signature
Crown Point, I	ndiana 4630		Print name
After recording	g, please return ir	istrument to:	96.

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