

NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL
RECORDER

2024-006253

STATE OF INDIANA
LAKE COUNTY
RECORDED AS PRESENTED

1:34 PM 2024 Feb 13

TRANSFER ON DEATH DEED

This TRANSFER ON DEATH DEED, executed on this 4th day of February, 2024, by:

(Collectively and separately "owner")
to the beneficiary,

Theresa A. Magliocca

(Collectively and separately "primary beneficiary")

WITNESSETH, that the said owner does hereby TRANSFER ON DEATH for NO CONSIDERATION, any interest remaining at the owner's death in the following parcel of land, and improvements and appurtenances thereto, in the county of LAKE, in the state of Indiana - legally described as:

Riverside Add. BLDG Lots 1 and 2

Commonly known as: 862 Indiana St., Hammond, IN 46320
Parcel identification: 45-031-302-048-000-023
Source of title: LAKE COUNTY, INDIANA DOC #

If the primary beneficiary does not survive the owner, or is not in existence when the owner dies, then the interest transferred on the owner's death to that predeceased primary beneficiary shall

- lapse and no transfer shall occur.
- be distributed to the predeceased primary beneficiary's LDPS.
- be distributed to

(Collectively and separately "contingent beneficiary")

Grantee:

Kevin Michael Jaceczko

Prepared by: Theresa A. Magliocca

FILED

FEB 13 2024

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

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IN WITNESS WHEREOF, the said owner has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of:

Signature: Theresa A. Magliocca
Print name: Theresa A. Magliocca
Capacity: GRANTOR

STATE OF INDIANA }
COUNTY OF LAKE }

On this 9th day of February, in the year of 2024, before me, a notary public in and for said state and county, and a resident of Lake County, Indiana, personally appeared

known or identified to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she/they executed the same.

Given under my hand this 9th day of February, 2024

Notary public: [Signature]
Print name: Mary T. Carpenter
My commission 02/17/2030

After recording, return document



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.

Signature: Theresa A. Magliocca
Print name: Theresa A. Magliocca
Date: 2-9-24