

THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. USING THIS FORM, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS AND INSERTING SPECIAL CLAUSES MAY CONSTITUTE THE PRACTICE OF LAW, WHICH SHOULD BE PERFORMED ONLY BY A LAWYER.

Parcel Identification No. _____

TRUSTEE'S DEED

(Revocable Living Trust)

THIS INDENTURE WITNESSETH, That _____
_____ as Trustee(s) of the _____
_____ Revocable Living Trust dated the
_____ day of _____, _____, ("Grantor") of _____ County in the State of _____
CONVEY(S) TO _____
_____ ("Grantee") of _____ County in the State of _____,
pursuant to the powers delegated to said Trustee(s) as set forth in said Trust Agreement, and as amended on the _____ day of
_____, _____, and also pursuant to the powers delegated to said Trustee(s) under Indiana law (IC 30-4-3-3), and as
amended, in consideration of One Dollar (\$1.00) and other valuable consideration, the receipt and sufficiency of which are hereby
acknowledged, the following described real estate in _____ County, in the State of Indiana, to-wit:

Dated this _____ day of _____, 20_____.

By: _____
Trustee under the _____
_____ Revocable
Living Trust Agreement, dated the _____ day of
_____, _____, and as amended on the
_____ day of _____.

By: _____
Trustee under the _____
_____ Revocable
Living Trust Agreement, dated the _____ day of
_____, _____, and as amended on the
_____, day of _____.

STATE OF _____, COUNTY OF _____) SS:

Before me, the undersigned, a Notary Public in and for said County and State, this _____ day of _____, 20 ____, personally appeared _____, Trustee(s) under the _____ Revocable Living Trust Agreement dated _____ day of _____, _____, and amended on the _____ day of _____, _____, and acknowledged the execution of the foregoing Trustee's deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My Commission Expires: _____

Signature _____

Resident of _____ County

Printed _____ Notary Public

STATE OF _____, COUNTY OF _____) SS:

Before me, the undersigned, a Notary Public in and for said County and State, _____ day of this _____, 20 ____, personally appeared _____, Trustee(s) under the _____ Revocable Living Trust Agreement dated _____ day of _____, _____, and amended on the _____ day of _____, _____, and acknowledged the execution of the foregoing Trustee's deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My Commission Expires: _____

Signature _____

Resident of _____ County

Printed _____ Notary Public

This instrument prepared by _____, Attorney at Law

MAIL TO: _____

Grantee's Mailing Address to which the tax statement should be mailed under I.C. 6-1.1-22-8.1

Grantee's Street Address or Rural Route Address if different than Mailing Address



© COPYRIGHT 2010, The Allen County Indiana Bar Association, Inc.

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.
