## PERSONAL REPRESENTATIVE'S DEED

LAURA M. SMITH,, as Personal Representative of the Estate of Charlie Mae Anderson, Deceased, by virtue of power and authority granted under the Indiana Code for administration of Decedent's Estates without Court supervision, in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration, CONVEYS to, L. B. ANDERSON and JANICE ANDERSON, jointly with right of survivorship, 601 Allen Street, Gary, In., 46403 the following described real estate in Lake County in the State of Indiana, to-wit:

> The North 45 feet of Tract 8 in Suburban Acres, in the City of Gary, as per plat thereof, recorded in Plat Book 23, page 13, in the Office of the Recorder of Lake County, Indiana, known as 923 Hamlin St., Gary, In. 46406

Subject to all mortgages, liens, encumbrances and taxes.

Subject to easements, covenants, restrictions and conditions of record.

IN WITNESS WHEREOF, the said LAURA M. SMITH, Personal Representative without Court supervision of the Estate of Charlie Mae Anderson Deceased, has hereunto set her hand and seal this 4th day of February, 2006. Parcel # 25-47-129-80cume This Document is the Representative of STATE OF INDIANA) the Lake County Recorder! COUNTY OF LAKE

Before me, the undersigned a notary public in and for said County and State, this 4 day of February, 2006, personally appeared the within named LAURA M. SMITH, Personal Representative without Court supervision of the Estate of Charlie Mae Anderson, Deceased, in the Lake Superior Court, Estate No.45D03-0405-EU-00034, Grantor in the above conveyance, and acknowledged the execution of the same to be her voluntary act and deed for the uses and purposes expressed therein.

IN WITNESS WHEREOF I have hereunto subscribed my name and affixed 

My Commission Expires

12/26/2008

Parcel No. 25-2
Send Tax Statement to
601 Allen Street
Gary, In. 46403
This instrument prepared by Rodney H. Bayless, Lawyen, rank
In. 46410

ARE CHOLINGA KATONA Porter

Porter

Parters, Lawyer, St. Virginia St., Merrillville,

lny H Dayline

002605

Prescribed by the State Board of Accounts (2005)

County form 170

## Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do herby affirm under the penalties of perjury: unty Recorder.

- I have reviewed the attached document for the purpose of identifying and, to the
  extent permitted by law, redacting all Social Security number in attached document.
- 2. I have reducted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

Signature of Declarant

RODULLY H. BAYLESS

Printed Name of Declarant