STATE OF INDIAN*
LAKE COUNTY
FILED FOR RECORD

2006 018640

2006 MAR -7 AM 8: 57

MICHAEL A BROWN RECORDER

Parcel No. <u>8-15-467-5</u>

WARRANTY DEED

ORDER NO. 920060632

THIS INDENTURE V	VITNESSETH, That Dee	-Etta Wright			(0,-,-,t-,-,)	
f <u>Lake</u>	County, in the State	of <u>INDIANA</u>		CONVEY	(Grantor) (S) AND WARRANT(S)	
Chester Easter Jr.					<u> </u>	
f Lake	County, in the State	of INDIANA		, for the si	(Grantee)	
EN AND 00/100	Codinty, in the Glate	OI <u>IINDIANA</u>	Dollars	_ , 10. the si (\$ <u>10.00</u>)	
nd other valuable cons escribed real estate in	sideration, the receipt ar Lake	-		y acknowled	lged, the following	
e Office of the Record ubject to real estate ta	t No. 9, in the Town of Maler of Lake County, India exes for 2005 due and passements of record:	una. URR Lyable in 2006 a nent is th	CIAI and thereafter. S	Subject to all		
	S					
	all easements, agreemer 024 Taft Place, Merrillvill			he address o	of such real estate is	
ay hills should be sent	to Grantee at such add	race unlace oth	arwise indicated	d below		
	EOF, Grantor has execu				, 2006	
rantor:	Apople Jath		rantor: gnature		(SEAL)	
inted <u>Dee Etta Wrigh</u>	ıt	Pr	inted		 	
TATE OF INDIANA	SS: ACKNOWLEDGEMENT					
OUNTY OF Lake) ACKNOWLEDGEWENT				
ee-Etta Wright	Public in and for said Co	•	· · · · · · · · · · · · · · · · · · ·			
ny representations the	execution of the foregoin erein contained are true. lotarial Seal this <u>1st</u> c		ed, and who, ha	ving been at	Jiy sworn, stated that	
y commission expires CTOBER 2, 2009	:: -	Signature	Yuul PAULA BARRICI	Wh.	, Notary Name	
		Resident of_		1.	, Notary Name	
nis instrument prepare	ed by <u>Atty Mark S. Luca</u>			V 46410	Oounty, maiana.	
	aft Place. Merrillville. Ind		— i i i i i i i i i i i i i i i i i i i	Syllan St.	PAULA BARRICK	
end tax bills to 6024	Taft Place. Merrillville. In	diana 46410		NOTAHY BEAL	Lake Gounty My Commission Expires October 2, 2009	
ICOR MO 2006/01-32	LY ENTERED FOR TAXATION SUI FINAL ACCEPTANCE FOR TRAN	BJECT TO SFER				

MAR - 6 2006

PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

004829

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

 This Document is the property of
- I, the undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

"VERIFIED FOR RECORDING BY TICOR TITLE"

Signature of Declarant

Printed Name of Declarant