2000 MAY 80 AM 92 13

Marking A. Sacto Officer

2007 043631

Mail tax bills to:

WARRANTY DEED

THIS INDENTURE WITNESSETH, That RANDALL H. BRANCH AND LYNETTE A. BRANCH, HUSBAND AND WIFE, GRANTORS, OF LAKE COUNTY, IN THE STATE OF INDIANA, CONVEY(S) AND WARRANT(S) TO:

DAVID J. CHALMERS, GRANTEE.

In consideration of the One-Dollar and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the following described real estate: 115
Lot 7 Block 14 Cline Gardens Addition, to the City of Hammond, as per plat thereof, recorded in Plat Book 31, page 71, in the Office of the Recorder of Lake County, Indiana. This Document is the property of
Property No./ Parcel No.: 007-26-32-0227-0007 Commonly known as: 6527 Ohio Avenue, Hammond, Indiana 46323
Subject to unpaid taxes and assessments, if any, defects in locations or measurements ascertainable only by surgery, building lines, highways, streets, alleys, easements, covenants, conditions and restrictions of record. Dated this
building lines, highways, streets, alleys, easements, covenants, conditions and restrictions of records.
CANTERES SETTING & 2001 CONTA
Dated this 22nd day of May
Subject to unpaid taxes and assessments, if any, defects in locations or measurements ascertainable only by subject, building lines, highways, streets, alleys, easements, covenants, conditions and restrictions of record. Dated this 22nd May May May LYNETTE A. BRANCH LYNETTE A. BRANCH LYNETTE A. BRANCH
RANDALL H. BRANCH LYNETTE A. BRANCH
STATE OF INDIANA, COUNTY OF LAKE, SS:
JEAN SEAL STREET
Before me, the undersigned, a Notary Public in and for said County and State, this 22nd day of
May 2007 RANDALL H. BRANCH AND LYNETTE A. BRANCH,
HUSBAND AND WIFE, personally appeared, and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.
witness whereof, I have hereunto substribed my hank and arrived my orietal scan
My Commission Expires 8/7/14 JUSEN MUSLING
Signature of Notary Public
My Commission Repaires
Resident of: County Susan Miedema Printed Name of Notary Public
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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. Thomas L. Kirsch
This instrument prepared by: THOMAS L. KIRSCH, 131 RIDGE RD. MUNSTER, IN 46321, Attorney at Law Mail To: 6527 Ohio Avenue, Hammond, Indiana 46323 Tigor, Title Highland Office/Region Title LLC
· CA
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