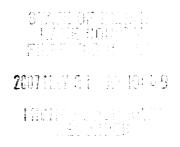
2007 044186



Mail Tax Bills to: 6736 Kentucky Avenue Hammond, IN 46323

Parcel No. (007)26-35-0035-0017

PERSONAL REPRESENTATIVE'S / EXECUTORS' DEED

THIS INDENTURE WITNESSETH that, Curtis L. Sargent, as Personal Representative of the Unsupervised Estate of Allie M. Sargent, Deceased, which is pending in Lake County Superior Court under Cause No. 45D01-0701-EU-00011, by virtue of its power and authority granted to personal representatives under the Indiana Code proceeding under Unsupervised Administration, do hereby grant, bargain, sell and convey to:

MATTHEW T. FROHNAPPLE and SHERRI D. OJIKUTU, JOINT TENANTS.

for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration, the following described real estate in Lake County, State of Indiana, to wit:

Lot Seventeen (17) and Lot Eighteen (18) Block Twenty-Five (25) in Manufacturers Addition to the City of Hammond, Lake County, Indiana, as Shown in Plat Book 2 Page 24 in Lake County, Indiana

commonly known as: 6736 Kentucky Avenue, Hammond, Indiana 46323.

SUBJECT TO THE FOLLOWING: All real estate taxes for 2006, payable 2007 and all subsequent years; public utility easements crossing or affecting the above-described real estate; zoning and building ordinances affecting the above described real estate; standard exceptions from title coverage, including but not limited to those matters of survey or environmental hazards; and, all matters created or suffered as a result of the Decedent's acts or occupancy of the above described real estate, or otherwise existing of public record as of the date of delivery of this Deed.

IN WITNESS WHEREOF, Curtis L. Sargent, as Personal Representative of the Unsupervised Estate of Allie M. Sargent, Deceased, has signed this Deed this 18th day of <u>May</u>, 2007. CURTIS L. SARGENT, as Personal Representative of the Unsupervised Estate of Allie M. Sargent COMMUNITY TITLE COMPANY FILE NO 1 37213 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 rut STATE OF INDIANA)) SS:

COUNTY OF LAKE

SUBSCRIBED AND SWORN to before me, a Notary Public in and for said County and State this

DULY ENTERED FOR TAXATION SUBJECT T My Commission Expire SINAL ACCEPTANCE FOR TRANSBignature:

County of Residence: ___ Printed: <u> MAY 2.9 2</u>007

> PEGGY HOLINGA KATCHA LAKE COUNTY AUDITOR

KARIEN CRAIG Lake County My Commission Expires November 4, 2014

This instrument prepared by: RUBINO, RUMAN, CROSMER, CERVEN, SMITH & SERSIC BY: CARLA K. SMTIH (Atty. #25803-64); 275 Joliet St., Suite 330, Dyer, Indiana 46311; Telephone (219)322-8222