

2008 062607

2008-08-05 11:42

Tax Add: 3920 Bonnie Drive, Crown Point, IN 46307

WARRANTY DEED

THIS INDENTURE WITNESSETH that **HARVEY D. WEST** and **ELIZABETH A. WEST, Husband and Wife**, of Lake County, and State of Indiana **CONVEY AND WARRANT** to **JASON A. WEST** of Lake County, in the State of Indiana, for the sum of Ten Dollars (\$10.00), and other good and valuable consideration, the receipt of which is hereby acknowledged, the following described Real Estate, in Lake County, in the State of Indiana, to-wit:

Lot 897, Lakes of the Four Seasons, Unit 6, as shown in Plat Book 39 page 12, in the Office of the Recorder of Lake County, Indiana.

Commonly known as 3920 Bonnie Drive, Crown Point, IN 46307.
Tax Parcel No. 11-10-0055-0022.

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

Subject to:

1. The terms, covenants, conditions and limitations in any instrument of record, effecting the use or occupancy of said real estate.
2. Existing tenancies.
3. Taxes for the year 2007 and subsequent years.
4. All liens and encumbrances created by or against the grantees herein.
5. Buildings lines and easements of record.

SEP 05 2008

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

Send Tax Statements to: 3920 Bonnie Dr. Crown Point IN 46307
Grantee Address: 3920 Bonnie Drive Crown Point, IN 46307

IN WITNESS WHEREOF, the said **HARVEY D. WEST** and **ELIZABETH A. WEST** have hereunto set their Hands and Seals this 27th day of August, 2008.

[Signature] (SEAL)
HARVEY D. WEST

[Signature] (SEAL)
ELIZABETH A. WEST

STATE OF INDIANA; COUNTY OF LAKE; SS:

Before me, the undersigned, a Notary Public, in and for said County and State, personally appeared the within named **HARVEY D. WEST** and **ELIZABETH A. WEST** and acknowledged the execution of the foregoing Deed to be their voluntary act and deed.

WITNESS my Hand and Seal this 27th day of August, 2008.

My Commission Expires 1-19-12
County of Residence: LAKE

OFFICIAL SEAL
CLAUDIA GODOY
NOTARY PUBLIC
STATE OF INDIANA
MY COMMISSION EXPIRES 1/19/12

[Signature]
NOTARY PUBLIC (Signature)
Claudia Godoy
NOTARY PUBLIC (Printed Name)

THIS INSTRUMENT PREPARED BY: **ROBERT L. MEINZER, JR. #9132-45**
MEINZER & BABINEAUX, Attorneys at Law
9190 Wicker Avenue, P. O. Box 111
St. John, IN 46373-0111
Tel: (219) 365-4321 Fax: (219) 365-9510

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.

[Signature]
Robert L. Meinzer, Jr., Attorney at Law

CK 7106

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HOLD

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