Tax No. 45-09-32-276-011.000-018

## 2008 WARRANTY DEED DESCRIPTION SEPTEMBER 17

MICHAEL AL BROWN

THIS INDENTURE WITNESSETH, That ERIC M. STAFFORD AND JENNIFER S. STAFFORD, HUSBAND AND WIFE, GRANTOR of LAKE County in the State of INDIANA, CONVEYS AND WARRANTS to NATHAN A. CHANDLER AND EMILY HESKETT, JOINT TENANTS WITH RIGHT OF SURVIVORSHIP of LAKE County in the State of INDIANA, as GRANTEES in consideration of One Dollar (\$1.00) and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the following described real estate in LAKE County, in the State of Indiana:

LOT 16 AND THE SOUTH ½ OF LOT 17 IN BLOCK 2 IN ALLEN-EARLE WOOD-DALI ADDITION TO HOBART, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 21, PAGE 45, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.	~
COMMONLY KNOWN AS: 449 S JOLIET ST., HOBART, INDIANA 46342	800
SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2007 TAXES PAYABLE 2008, 2008 TAXES PAYABLE 2009 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.  SUBJECT TO EASEMENTS, RESTRICTIONS AND COVENANTS OF RECORD, IF ANY.	064071
Dated this 28 <sup>th</sup> day of AUGUST 2008 ent is the property the Lake County legandr!  ERIC M. STAFFORD  JENNIFER S STAFFORD	
STATE OF INDIANA COUNTY OF PORTER SS:	
Before me, the undersigned, a Notary Public in and for said County and State, this 28th day of personally appeared: ERIC M. STAFFORD AND JENNIFER S. STAFFORD and acknowledged the efforegoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.  My commission expires: 01/12/16 Signature Signature Printed TRACIE A. MILENKOFF No	AUGUST . 2008, execution of the control of the cont
This instrument prepared by  PATRICK J. McMANAMA, Attorney at Law, Identification No: 95.  No legal opinion given to Grantor. All information used in preparatio document was supplied by title company.	34-45 on of
Return Deed To: GRANTEE(S) – 449 S. JOLIET ST., HOBART, IN 46342 Grantee's street or rural route address: 449 S. JOLIET ST., HOBART, IN 46342 Send Tax Bills To: GRANTEE(S) – 449 S. JOLIET ST., HOBART, IN 46342	TION OUR IECT TO
I affirm, under the penalties for perjury, that I have taken reasonable care to reclinate sacretists.	burity number in time
Signature of Preparer  PEGGY HOLING PEGGY HOLING	A KATONA
TRACIE A. MILENKOFF  LAKE COUNTY	AUDITOR
Name of Preparer	
04.4	

014952

COMMUNITY TITLE COMPANY FILE NO L 40300

MEMPE