

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2010 060798

2010 OCT 20 AM 8:45

MICHELLE FAJMAN  
RECORDER

Prepared By  
Mail Tax Bills To:  
Todd R. Kelderhouse  
139 Valley View Lane  
Dyer, IN 46311

Parcel No: 45-10-24-180-009.000-034

10 BM 18055 (1023) QUIT-CLAIM DEED

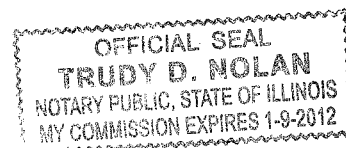
This indenture witnesseth that Todd R. Kelderhouse, as Trustee under the provisions of a trust agreement dated the 19<sup>th</sup> day of October, 2009, and known as TODD R. KELDERHOUSE REVOCABLE LIVING TRUST, of Lake County in the State of Indiana, for and in consideration of the sum of TEN (\$10.00) DOLLARS, and other good and valuable consideration, the receipt of which is hereby acknowledged,

Releases and quit claims unto TODD R. KELDERHOUSE of 139 Valley View Lane, Dyer, Lake County in the State of Indiana, the following described lands and premises situated in Lake County, Indiana:

LEGAL DESCRIPTION

Lot Numbered 3 as shown on the recorded plat of High Point Trails Unit 3 to the Town of Dyer recorded in Plat Book 86, page 18, in the Office of the Recorder of Lake County, Indiana.

Old Key No. 12-14-0279-0003 Unit 12  
Property no. 45-10-24-180-009.000-034



Commonly known as: 139 Valley View Lane, Dyer, IN 46311

Dated this 17<sup>th</sup> day of September, 2010

Todd R. Kelderhouse

State of IL, Cook County ss:

Before me, the undersigned, a Notary Public in and for said County and State, this 17<sup>th</sup> day of September, 2010, personally appeared Todd R. Kelderhouse acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER  
OCT 19 2010

PEGGY HOLINGA KATONA  
Notary Public LAKE COUNTY AUDITOR

My Commission Expires: 1-9-12 County of Residence Cook

This instrument prepared by Todd R. Kelderhouse, 139 Valley View Lane, Dyer, IN 46311

I affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security number in the attached document, unless required by law.



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AMOUNT \$ 16.00  
CASH \_\_\_\_\_ CHARGE \_\_\_\_\_  
CHECK # 8441  
OVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK AB