

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2010 077082

2010 DEC 29 PM 2:36

MICHAEL J. FAUMAN  
RECORDER

**WARRANTY DEED**

Jax No. 43-19-24-156-007.000-008

THIS INDENTURE WITNESSETH, That DONALD R. ADKINS, GRANTOR(S) of LAKE County in the State of INDIANA, CONVEYS AND WARRANTS to KEVIN MARTIN AND LINDSEY M. MARTIN, HUSBAND AND WIFE, of LAKE County in the State of INDIANA as GRANTEE(S) 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:

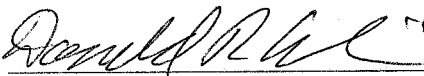
**LOT 45 IN BROOKWOOD SUBDIVISION, UNIT FOUR, AN ADDITION TO THE TOWN OF LOWELL, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 86 PAGE 61, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.**

COMMONLY KNOWN AS: 17559 BROOKWOOD DRIVE, LOWELL, INDIANA 46356

SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2010 TAXES PAYABLE 2011, AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.


SUBJECT TO EASEMENTS, RESTRICTIONS AND COVENANTS OF RECORD, IF ANY.

Dated this 17 day of December, 2010.

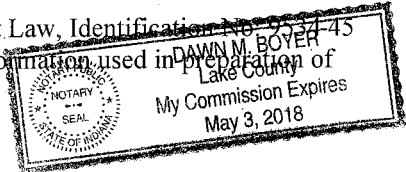
  
DONALD R. ADKINS

STATE OF INDIANA  
COUNTY OF Lake SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 17 day of December, 2010, personally appeared: DONALD R. ADKINS and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

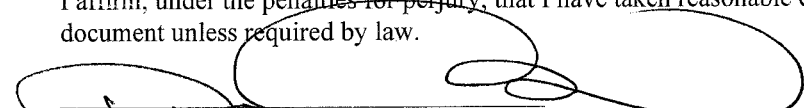
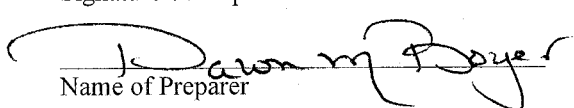
My commission expires: \_\_\_\_\_  
Resident of \_\_\_\_\_ County Printed , Notary Public

This instrument prepared by PATRICK J. McMANAMA, Attorney at Law, Identification No. 203445  
No legal opinion given to Grantor. All information used in preparation of document was supplied by title company.



Return Deed To: <sup>E.</sup> KEVIN MARTIN AND LINDSEY M. MARTIN  
Grantee's street or rural route address: 17559 BROOKWOOD DRIVE, LOWELL, INDIANA 46356  
Send Tax Bills To: KEVIN MARTIN AND LINDSEY M. MARTIN - 17559 BROOKWOOD DRIVE, LOWELL, INDIANA 46356

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 of Preparer  
  
Name of Preparer

COMMUNITY TITLE COMPANY  
FILE NO 44103

AMOUNT \$ 16.00  
CASH \_\_\_\_\_ CHARGE CM  
CHECK # \_\_\_\_\_  
OVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK AS

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

031154

DEC 29 2010

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR