

2011 072381

2011 DEC 14 AM 10:34

MICHAEL J. SAJMAN
RECORDER
Tax ID No.
27-17-0030-0003
45-09-32-363-038.000-018

WARRANTY DEED

THIS INDENTURE WITNESSETH THAT

John Wood

CONVEY(S) AND WARRANT(S) TO

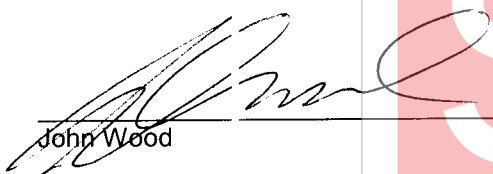
Jonathan Schiesser and Cassandra Schiesser, Husband and Wife, for Ten Dollars and other valuable consideration the receipt whereof is hereby acknowledged, the following described REAL ESTATE in Lake County, in the State of Indiana, to wit:

The East 158 feet of the North 60 feet of the South 1/2 of the North 1/2 of the Southeast 1/4 of the Southwest 1/4 of the Southwest 1/4 of Section 32, Township 38 North, Range 7 West of the 2nd Principal Meridian, in the City of Hobart, Lake County, Indiana,

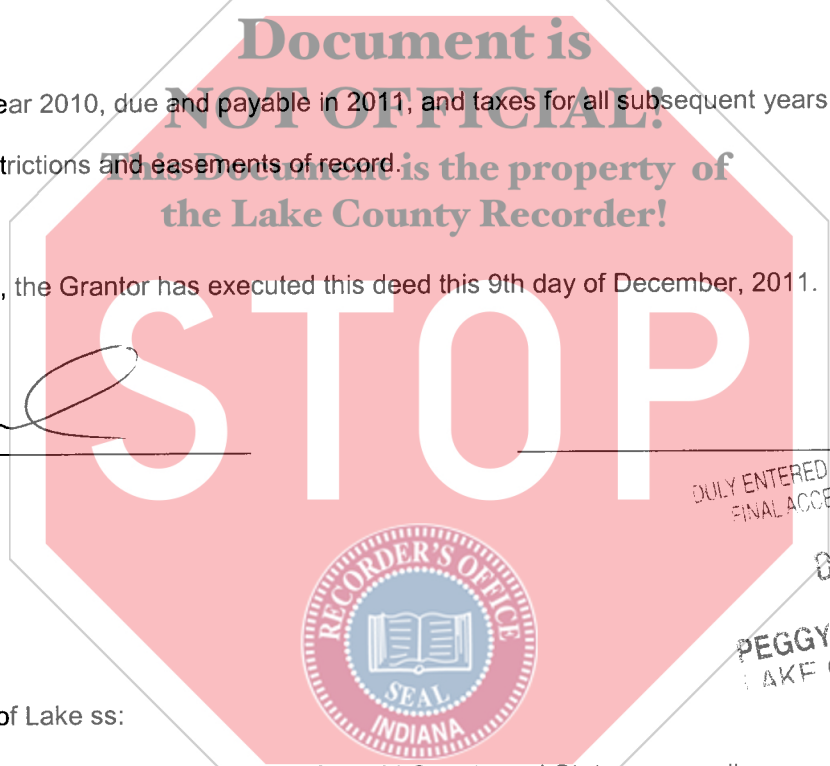
Subject to taxes for the year 2010, due and payable in 2011, and taxes for all subsequent years.

Subject to covenants, restrictions and easements of record.

IN WITNESS WHEREOF, the Grantor has executed this deed this 9th day of December, 2011.



John Wood



DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER
DEC 13 2011
PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

State of Indiana, County of Lake ss:

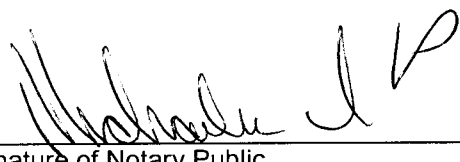
Before me, the undersigned, a Notary Public in and for said County and State, personally appeared the within named John Wood who acknowledged the execution of the foregoing Deed and who, having been duly sworn, stated that the representations therein contained are true.

WITNESS, my hand and Seal this 9th day of December, 2011.

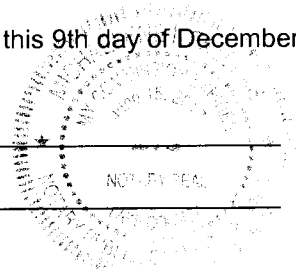
My Commission Expires: _____

Printed Name of Notary Public _____

Notary Public County and State of Residence _____



Signature of Notary Public



This instrument was prepared by:
Debra A. Guy, Attorney-at-Law, IN #24473-71 MI #P69602
202 S. Michigan Street, Ste. 300, South Bend, IN 46601

029948

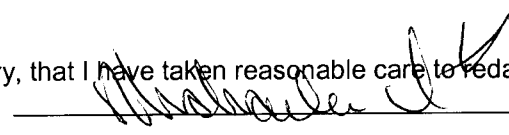
Property Address:
914 Lake Street, Hobart, IN 46342

Grantee's Address and Mail Tax Statements To:

914 Lake Street
Hobart, IN 46342

File No.: 11-44118

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. _____ (Type or Print Name)



11-44118

Not
MT
Not