

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2013 047904

2013 JUL -1 AM 11:06

MICHAEL B. BROWN
RECORDER

QUITCLAIM DEED

TAX I.D. NO. 45-08-36-154-021.000-018

THIS INDENTURE WITNESSETH, that CHARLES L. HUGHES, LIFE TENANT, (GRANTOR), of LAKE County in the State of INDIANA QUITCLAIMS to CHARLES L. HUGHES, AS TRUSTEE, UNDER THE CHARLES L. HUGHES REVOCABLE LIVING TRUST DATED JUNE 27, 2011, (GRANTEE), of LAKE County in the State of INDIANA, 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 86, CRESTWOOD TRACE, IN THE CITY OF HOBART, AS SHOWN IN PLAT BOOK 42, PAGE 29, AND AS AMENDED BY CERTIFICATE OF CORRECTION DATED SEPTEMBER 19, 1973 AND RECORDED SEPTEMBER 25, 1973 AS DOCUMENT NO. 22292, IN LAKE COUNTY, INDIANA.

THIS DEED EXTINGUISHES LIFE ESTATE RESERVED IN DEED RECORDED JULY 5, 211, DOCUMENT NO. 2011-036088.

Commonly known as: 2830 WALNUT LANE, HOBART, IN 46342

DULY ENTERED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER

Dated this 21 day of May, 2013

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JUN 26 2013

X Charles L. Hughes
CHARLES L. HUGHES, LIFE TENANT

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, this 21 day of May, 2013, personally appeared CHARLES L. HUGHES 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: 5/9/17
Resident of Lake County

Signature: [Signature]
Printed: _____, Notary Public

This instrument prepared by: PATRICK J. McMANAMA, Attorney at Law, ID No. 9534-45
No legal opinion given to Grantor. All information used in preparation of document was supplied by title company.

ELIZABETH R. KINZIE
Lake County
My Commission Expires
May 9, 2017

RETURN DEED TO: GRANTEE
GRANTEE'S STREET OR RURAL ROUTE ADDRESS: 2830 WALNUT LANE, HOBART, IN 46342
SEND TAX BILLS TO: GRANTEE

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]
Signature of Preparer

Elizabeth Kinzie
Printed Name of Preparer

16- CM 28
COMMUNITY TITLE COMPANY
FILE NO 134086