STATE OF INDIAA: LAKE COUNTY FILED FOR RECORD

2013 079906

2013 OCT 28 AM 10: 34

MICHAEL B. BROWN RECORDER

Tax No. 45-13-05-351-018.000-018

QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that FRANK A. PASTOR, LIFE TENANT, GRANTOR, of LAKE County in the State of INDIANA QUITCLAIMS to THE FRANK A. PASTOR REVOCABLE LIVING TRUST dated JULY 10, 2006, 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 4 IN UNIT 2 OF BARRINGTON RIDGE, A PLANNED UNIT DEVELOPMENT IN THE CITY OF HOBART, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 75, PAGE 62, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

THIS DEED EXTINGUISHES LIFE ESTATE RESERVED IN DOCUMENT NUMBER 2007-081939

Commonly known as: 1594 LILAC COURT, HOBART, IN 46342

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Dated this 4 TH day of OCTOBER, 2013.
Marine Daniel De la Company de
FRANKA. PASTOR, LIFE TENANT
FRANKIA. PASTOR, LIFE TENANT
MOI OFFICIAL:
STATE OF INDIANA, COUNTY OF PORTERCSSMENT is the property of
Before me; the undersigned, a Notary Public in and for said County and State, this 4 TH day of OCTOBER , 2013,
Before me, the undersigned, a Notary Public in and for said County and State, this 4 TH day of OCTOBER , 2013,
personally appeared FRANK A. PASTOR, LIFE TENANT, 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: 01/12/2016 Signature
Resident of PORTER County Printed TRACIE A. MILENKOFF Votery 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.
D. LT. CDANTED
Return Deed To: GRANTEE Grantee(s) Street or Rural Route Address: 1594 LILAC COURT, HOBART, IN 46342
Mail Tax Bills To: GRANTEE
Mail Tax Bills 10. GRANTEE
Jaffirm, under the penalties for perjury that I have taken reasonable care to redact each Social Security number in this
11 N \ \ A \ A1 \ \ \ \ \ A1 \ \ \ \ A1 \ \ \ \
TRACIE A. MILENKOFF Name of Preparer Name of Preparer
Signature of Preparer Name of Preparer
DULY ENTERED FOR TAXATION SUBJECT FINAL ACCEPTANCE FOR TRANSFER COMMUNITY TITLE COMPANY CM
FINAL ACCEPTANCE FOR TRANSFER CUIVIIVIUNITY TILE COMPANY C ***
FILE NO 113924
OCT 1 8 2013
PEGGY HOLINGA KATONA 15878
LAKE COUNTY AUDITOR