

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2014 077844

2014 DEC -8 AM 10:02

MICHAEL D. BROWN  
RECORDER

**WARRANTY DEED**

TAX: I.D. NO. 45-07-06-377-015.000-023 AND TAX: I.D. NO. 45-07-06-377-014.000-023

**THIS INDENTURE WITNESSETH**, That **MARY AARON**, GRANTOR of **LAKE** County in the State of **INDIANA**, CONVEYS AND WARRANTS to **LUZ B. PINA AND MASSIOSARE FAVELA, JOINT TENANTS WITH RIGHT OF SURVIVORSHIP**, of **LAKE** County in the State of **INDIANA**, as GRANTEES 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 9 BLOCK 2 AND THE EAST 1/2 OF LOT 10, BLOCK 2, IN LARNED'S SECOND ADDITION TO HAMMOND, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 11 PAGE 6, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.**

COMMONLY KNOWN AS: **1034-1032 MOSS STREET, HAMMOND, INDIANA 46320**

SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2014 TAXES PAYABLE 2015 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.

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

Dated this 5<sup>th</sup> day of December, 2014.

*Mary Aaron*  
MARY AARON



STATE OF INDIANA  
COUNTY OF LAKE SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 5<sup>th</sup> day of December, 2014, personally appeared: **MARY AARON**, 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: 2.20.21 Signature *Deanna L Griggs*  
Resident of lace County Printed Deanna L Griggs, 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.

RETURN DEED TO: **GRANTEES**  
GRANTEE'S STREET OR RURAL ROUTE ADDRESS: **1034-1032 MOSS STREET, HAMMOND, INDIANA 46320**  
SEND TAX BILLS TO: **GRANTEES**

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.

*Deanna L Griggs*  
Signature of Preparer

Deanna L Griggs  
Printed Name of Preparer

**05569**

DULY ENTERED FOR TAXATION SUBJECT  
FINAL ACCEPTANCE FOR TRANSFER

**DEC 08 2014**

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

COMMUNITY TITLE COMPANY  
FILE NO 146988

*Handwritten initials: 160, CM, 101*