STATE OF INDIA.
LAKE COUNTY
FILEO FOR RECORD

2014 080123

2014 DEC 17 AM 8: 45

MICHAEL B. BROWN RECORDER

Send Tax Bills To: PATRICK A. BYTNAR 7812 Indiana Boundary Gary, Indiana 46403 Return to: PATRICK A. BYTNAR 7812 Indian Boundary Gary, Indiana 46403

QUITCLAIM DEED

THIS INDENTURE WITNESSETH THAT,

MARIAN E. BYTNAR, as sole Trustee of THE BYTNAR FAMILY TRUST, under Trust Agreement dated December 12, 2011, of Porter County, State of Indiana (Grantor),

releases and quitclaims to

PATRICK A. BYTNAR of Lake County, Indiana ("Grantee")

for no consideration, all of the Grantor's right, tile and interest, in and to the following described real estate in Lake County, State of Indiana, to wit:

Lots 27, 28 and 29 in Block 5 of Norcott's Addition to Indiana City, in the City of Gary, as per plat thereof recorded in Plat Book 1, page 14, in the Office of Recorder of Lake County, Indiana.

This conveyance is subject to easements, highways, ditches, drains, restrictions of record and real estate taxes for 2014 and subsequent years.

Common Address of Real Estate:

7812 Indian Boundary, Gary, Indiana 46407

Residence Address of Grantee:

7812 Indian Boundary, Gary, Indiana 46407

Property Number:

45-05-32-276-036.000-004

Page 1 of 2

FINAL ACCEPTANCE FOR TRANSFER

DEC 1 6 2014

PEGGY HOLINGA KATONA AKE COUNTY AUDITOR 017117

AMOUNT \$ 18-

CASH _____ CHARGE _____

OVERAGE_____

COPY _____ NON - COM _____

K

December, 2014.	OF, Grantors have executed this deed on this day of
	THE BYTNAR FAMILY TRUST, under Trust Agreement dated December 12, 2011 (Grantor)
	MARIAN E. BYTNAR, Trustee
STATE OF INDIANA)	
)s LAKE COUNTY)	S.
MARIAN E. BYTNAR, a perso TRUST under Trust Agreement	Public in and for said County and State, personally appeared on known to me, as sole Trustee of the BYTNAR FAMILY dated Dece, ber 12, 2011, Grantor in the above and foregoing the execution thereof in said capacity as her free and voluntary ated therein.
WITNESS MY HAND	and Notarial Seal this 3 day of Scenber, 2014.
Marisa Turne	he Lake County, Mr. sao Toletta
Notary Public Na	me Printed)
Commission Expires: February	
County of Residence: Lake Cou	inty OF INPLIANT
I affirm, under the pena	ties for perjury, that I have taken reasonable care to redact each

Social Security number in this document, unless required by law. Anthony DeBonis, Jr.

This instrument prepared by Anthony DeBonis, Jr., Attorney at Law, ANTHONY DeBONIS, JR. & ASSOCIATES ATTORNEYS AT LAW, LLC, 214 Main Street, Hobart, Indiana 46342-4440, (219) 940-9963, (219) 940-9965 Facsimile

Page 2 of 2