STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2015 068262

2015 OCT -5 PM 1:39

MICHAEL B. BROWN RECORDER

TRUSTEE'S DEED

TAX: I.D. NO. 45-07-08-356-025.000-023

THIS INDENTURE WITNESSETH, That THE SCHUBERT LIVING TRUST DATED FEBRUARY 15, 2006, (GRANTOR), of LAKE County in the State of INDIANA, CONVEYS to RODNEY A. WALDROP AND JANICE RENEE WELCH, JOINT TENANTS WITH RIGHT OF SURVIVORSHIP, (GRANTEES) 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 FOUR (4), BLOCK ONE (1), UNIVERSITY GARDENS SECOND ADDITION, IN THE CITY OF HAMMOND, AS SHOWN IN PLAT BOOK 32, PAGE 57, IN LAKE COUNTY, INDIANA.

COMMONLY KNOWN AS: 7204 NORTHCOTE AVENUE, HAMMOND, IN 46324

SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2014 TAXES PAYABLE 2015. 2015 TAXES PAYABLE 2016 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.

SUBJECT TO EASEMENTS, RESTRICTIONS AND COVENANTS OF RECORD, IF ANY. THE GRANTOR CERTIFIES THAT THIS ORDANCE WITH AND PURSUANT TO. THE TERMS AND PROVISIONS OF THE THE ABOVE DESCRIBED REAL ESTAT AGREEMENT UNDER WHICH TITLE TO THE TRUSTER HAS FULL POWER AND AUTHORITY TO EXECUTE THIS DEED AS AS THE DATE OF FASCUTION OF Ambehe Lake County Recorder! DEANNA L. GRIGGS Lake County My Commission Expires bruary 20, 2021 FRANK STIGLYTZ. SUCCESSOR TRUSTEE STATE OF INDIANA, COUNTY OF Before me, the undersigned, a Notary Public in and for said County and State, this day of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official scal. My commission expires: A. do A Signature Resident of _ | CK-Notary Public MATTHEW W. DEULLEY, Attorney at Law, ID No. 27813-45 This instrument prepared by: No legal opinion given to Grantor. All information used in preparation of document was supplied by title company. RETURN DEED TO: **GRANTEE** GRANTEE'S STREET OR RURAL ROUTE ADDRESS: 7204 NORTHCOTE AVENUE, HAMMOND, IN 46324

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 required by

Signature of Preparer

Defina

Printed Name of Preparer

COMMUNITY TITLE COMPANY FILE NO 1586

DULY ENTERED FOR TAXATION SUBJECT FINAL ACCEPTANCE FOR TRANSFER

OCT 0 2 2015.

JOHN E. PETALAS LAKÉ COUNTY AUDITOR