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MICHAEL B. BROWN RECORDER

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WARRANTY DEED

TAX: I.D. NO. 45-07-17-355-012.000-023

THIS INDENTURE WITNESSETH, That DAVID Z. NOLEN, (GRANTORS), of LAKE County in the State of INDIANA, CONVEYS AND WARRANTS to JOEL PORTER, (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 5 IN BEVERLY FOURTH ADDITION IN THE CITY OF HAMMOND, AS PER PLAT THEREOF RECORDED IN PLAT BOOK 28 PAGE 84 IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Commonly known as: 7949 DELMAR AVENUE, HAMMOND, INDIANA, 46324

SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2015 TAXES PAYABLE 2016, 2016 TAXES PAYABLE 2017 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.

SUBJECT TO EASEMENTS, RESTRICTIONS AND COV ENANTS OF RECORD, IF ANY. is Document is the property of DAVID Z. NOLEN the Lake County Recorder! STATE OF INDIANA **COUNTY OF** Before me, the undersigned, a Notary Public in and for said County and State, this _,2016, personally \day of appeared: DAVID Z. NOLEN and acknowledged the execution of the foregoing deed of, I have hereunto subscribed my name and affixed my official seal. My commission expires: Signatur Resident of County Printed Notary Public STATE OF Patricia Ludington **COUNTY OF** SS: Resident Of Lake County Before me, the undersigned, a Notary Public in and for said course appeared: Commission appires , 2016, personally taregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal. My commission expires: Signature Resident of County Printed , Notary Public This instrument prepared by: MATTHEW W. DEULLEY, Attorney at Law, ID No. 27813-45 No legal opinion given to Grantor. All information used in preparation of document was supplied by title company. RETURN DEED TO: GRANTEES GRANTEE STREET OR RURAL ROUTE ADDRESS: 7949 DELMAR AVENUE, HAMMOND, INDIANA, 46324 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. Printed Name of Prepar ure of Preparer

Community Title Comp

File No.