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MAIL TAX BILLS TO:
Marth Alice Wright, Trustee
11321 W 126th St
Cedar Lake, IN 46303

2017 008134

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
2017 FEB -6 PH 1:08
MICHAEL B. BROWN
RECORDER



QUIT CLAIM DEED

THIS INDENTURE WITNESSETH, that Martha A. Wright, Trustee, or her successors in trust, under the WRIGHT LIVING TRUST, dated October 21, 2002, and any amendments thereto, of Lake County in the State of Indiana, do hereby grant, bargain, sell and convey to:

MARTHA ALICE WRIGHT, Trustee, or her successors in trust, under the WRIGHT LIVING TRUST, dated Dec 13, 2016 and any amendments thereto, for good and valuable consideration, the receipt of which is hereby acknowledged, the following described real estate in Lake County, State of Indiana
Legal description; Highgrove 2nd ADD. ALL LOTS 31 to 36.

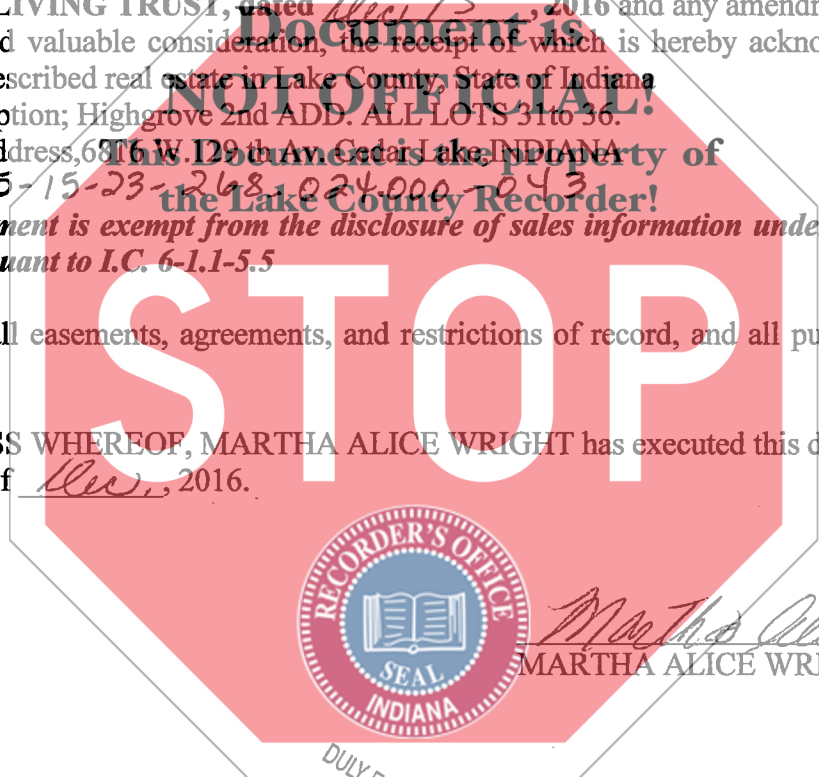
Property Address, 6819 W. 129th Ave, Cedar Lake, INDIANA

45-15-23-268-024-000-043

This instrument is exempt from the disclosure of sales information under State Form 46021, pursuant to I.C. 6-1.1-5.5

Subject to all easements, agreements, and restrictions of record, and all public rights of way.

IN WITNESS WHEREOF, MARTHA ALICE WRIGHT has executed this deed this 13th day of Dec, 2016.



Martha Alice Wright
MARTHA ALICE WRIGHT

DULY ENTERED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER
FEB 06 2017

JOHN E. PETALAS
LAKE COUNTY AUDITOR

18
CK# 7741

STATE OF INDIANA)

) ss.

010759

NO SALES DISCLOSURE NEEDED

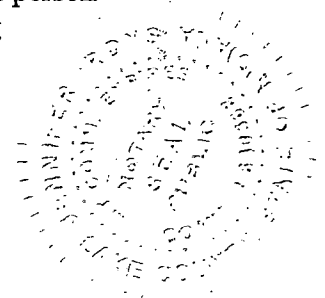
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Approved Assessor's Office

By:

COUNTY OF LAKE)

Before me, the undersigned, a Notary Public, in and for said County and State, this 13th day of December 2016, personally appeared MARTHA ALICE WRIGHT, said person being over the age of 18 years, and acknowledged the execution of the foregoing instrument.



Jennifer Irons

Jennifer Irons, Notary Public
Resident of Lake County, Indiana

My Commission Expires: DECEMBER 16, 2020



This _____ instrument _____ prepared _____ by _____

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. By: _____