

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2017 009534

2017 FEB 13 PM 4:14

MICHAEL B. BROWN  
RECORDER

2

Recording requested by: \_\_\_\_\_ Space above reserved for use by Recorder's Office

When recorded, mail to: \_\_\_\_\_ Document prepared by: \_\_\_\_\_

Name: Jonathan Lawson Name: Jonathan Lawson

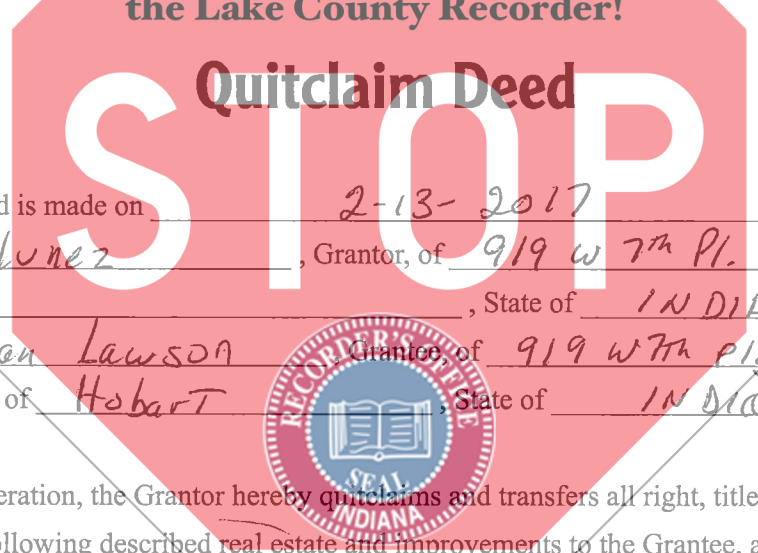
Address: 1226 Cass St Address: 1226 Cass St

City/State/Zip: Gary IN 46403 City/State/Zip: Gary IN 46403

Property Tax Parcel/Account Number: 45-09-31-328-009.000-213

**Document is NOT OFFICIAL!**

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This Quitclaim Deed is made on 2-13-2017, between Ryne Nunez, Grantor, of 919 W 7th Pl. Hobart IN 46342, City of \_\_\_\_\_, State of INDIANA, and Jonathan Lawson, Grantee, of 919 W 7th place, City of Hobart, State of INDIANA 46342

For valuable consideration, the Grantor hereby quitclaims and transfers all right, title, and interest held by the Grantor in the following described real estate and improvements to the Grantee, and his or her heirs and assigns, to have and hold forever, located at 919 W 7th place, City of INDIANA Hobart, State of INDIANA:  
Hobart Lakewood Add. lot 6 Bl. 5

DULY ENTERED FOR TAXATION SUBJECT  
FINAL ACCEPTANCE FOR TRANSFER  
FEB 13 2017

010937

Subject to all easements, rights of way, protective covenants, and mineral reservations of record, if any. Taxes for the tax year of 2017 shall be prorated between the Grantor and Grantee as of the date of recording of this deed.

Approved Assessor's Office

Quitclaim Deed Pg.1 (11-12)

NO SALES DISCLOSURE NEEDED

Handwritten initials and signatures, including '18', 'C.B.S.', and 'AD'.

Page 2 of  
Quitclaim Deed  
for  
45-09-31-328-  
009.000-018

Dated: 2/13/17

[Signature]

Signature of Grantor

Ryne  
Name of Grantor

WUNEZ  
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the Lake County Recorder!

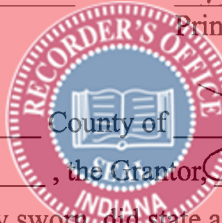
[Signature]  
Signature of Witness #1

Amy Nondorf  
Printed Name of Witness #1

[Signature]  
Signature of Witness #2

Alicia Scheidt  
Printed Name of Witness #2

State of Indiana



On 2-13-17

County of Lake, the Grantor, Ryne Alexis Wunez

personally came before me and, being duly sworn, did state and prove that he/she is the person described in the above document and that he/she signed the above document in my presence.

[Signature]

Notary Signature

"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."  
PREPARED BY: JMC

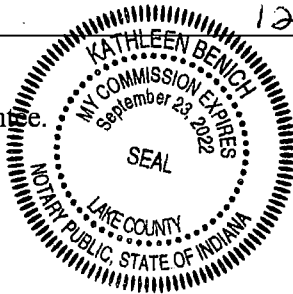
Shown valid  
[Signature]

Notary Public,

In and for the County of Lake State of Indiana

My commission expires: 1226 Cass St Seal

Send all tax statements to Grantor



gary IN 46403