

2017 011184

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

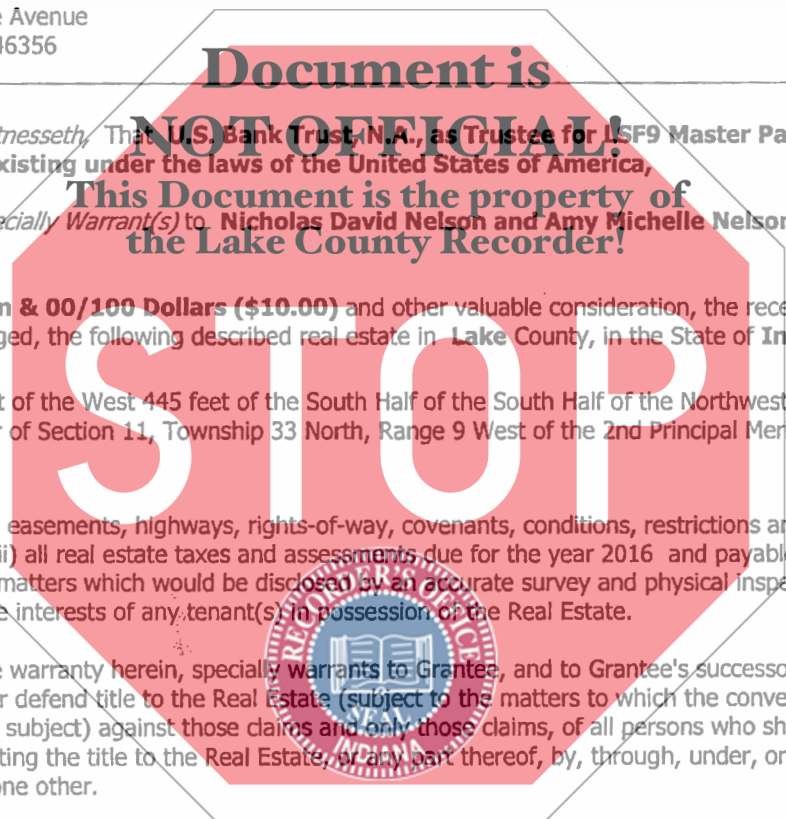
2017 FEB 23 AM 9:04

MICHAEL B. BROWN  
RECORDER

**SPECIAL WARRANTY DEED**

**Property Address:**  
16207 Cline Avenue  
Lowell, IN 46356

**Tax Parcel No.:** 45-19-11-301-006.000-007



*This Indenture Witnesseth*, That **U.S. Bank Trust, N.A.**, as Trustee for **LSF9 Master Participation Trust**, organized and existing under the laws of the United States of America,

Convey(s) and Specially Warrant(s) to **Nicholas David Nelson and Amy Michelle Nelson, husband and wife**

for the sum of **Ten & 00/100 Dollars (\$10.00)** and other valuable consideration, the receipt of which is hereby acknowledged, the following described real estate in **Lake County, in the State of Indiana:**

The North 245 feet of the West 445 feet of the South Half of the South Half of the Northwest Quarter of the Southwest Quarter of Section 11, Township 33 North, Range 9 West of the 2nd Principal Meridian, Lake County, Indiana.

**Subject To** (i) all easements, highways, rights-of-way, covenants, conditions, restrictions and other limitations of record, if any; (ii) all real estate taxes and assessments due for the year 2016 and payable in 2017 and thereafter, (iii) all matters which would be disclosed by an accurate survey and physical inspection of the Real Estate; and (iv) the interests of any tenant(s) in possession of the Real Estate.

Grantor, as its sole warranty herein, specially warrants to Grantee, and to Grantee's successors and assigns, that Grantor will forever defend title to the Real Estate (subject to the matters to which the conveyance is hereinabove made subject) against those claims and only those claims, of all persons who shall claim title to or assert claims affecting the title to the Real Estate, or any part thereof, by, through, under, or based upon the acts of, Grantor, but none other.

The undersigned person executing this Deed on behalf of Grantor represents and certifies that he/she has been fully empowered to execute and deliver this Deed pursuant to the Power of Attorney referenced below and said Power of Attorney remains in full force and effect and has not been terminated or rescinded by either party; that Grantor has full capacity to convey the real estate described herein, and that all necessary action for the making of such conveyance has been taken and done.

021288

File No.: 4035-93246

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METROPOLITAN TITLE OF IN  
9604 COLDWATER ROAD  
SUITE 105  
FORT WAYNE IN 46825

DULY ENTERED FOR TAXATION SUBJECT  
FINAL ACCEPTANCE FOR TRANSFER

FEB 21 2017

JOHN E. PETALAS  
LAKE COUNTY AUDITOR

Handwritten notes: # 4035123517, \$20.00, and initials 'E M'.

IN WITNESS WHEREOF, Grantor has caused this deed to be executed this 13 day of January, 2017.

U.S. Bank Trust, N.A., as Trustee for LSF9 Master Participation Trust by Caliber Real Estate Services, LLC as its Attorney-in-Fact under Power of Attorney recorded in 2016048117 as Instrument No. 2016048117

By: [Signature]  
Heather Sayabouasy  
Its: Authorized Signatory



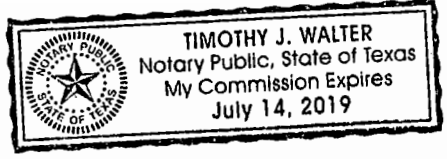
Acknowledgement  
State of Texas; Dallas County;

Before me, a Notary Public in and for the said County and State, personally appeared Heather Sayabouasy the Authorized Signatory of Caliber Real Estate Services, LLC as Attorney-in-Fact for **U.S. Bank Trust, N.A., as Trustee for LSF9 Master Participation Trust**, who acknowledged the execution of the foregoing Special Warranty Deed, and who, having been duly sworn, stated that the representations therein contained are true and correct, to the best of his/her knowledge, information and belief.

Witness my hand and notarial seal this 13 day of January, 2017.

My commission expires: \_\_\_\_\_  
Signature [Signature]  
Printed Timothy J. Walter, Notary Public  
Residing in Texas County, Dallas

This instrument prepared by Jeffrey S. Harlan, Attorney at Law.



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.

Greg Puntt

Name:

Grantee's Mailing Address and Mailing Address for Tax Bills:  
(must be a street address)

16207 Cline Ave  
LOWEN IN 46356

