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2017 058778

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 AUG 30 AM 10: 10

MICHAEL B. BROW! RECORDER



WARRANTY DEED

Property Address: 13858 Butternut Street Cedar Lake, IN 46303

Tax Parcel No.: 45-15-27-404-011.000-014

This Indenture Witnesseth, That Jane I. Samulowitz, surviving joint tenant of Eline L. Halsen, deceased

Convey(s) and Warrant(s) to Christian OFFICIAL

for the sum of Ten & 00/100 Pollars (\$10.00) and other valuable consideration, the following described real estate in Lake County, in the State of Indiana:
the Lake County Recorder!

Lots Numbered 10, 11 and 12 in Block Numbered 10 in Lake Shore Addition to Cedar Lake in Hanover Township, County of Lake, State of Indiana.

Subject to real estate taxes not yet due and payable.

Jane I. Samulowitz, the grantor herein, states that she is the surviving joint tenant of Eline L. Halsen deceased, with whom she acquired title to said premises above as joint tenants with full rights of survivorship by a deed dated January 17, 2011, and recorded February 1, 2011 in the Office of the Recorder of Lake County, Indiana, as Instrument No. 2011-006311, and that Eline L. Halsen died on December 19, 2016

Subject To any and all easements, agreements, and restrictions of record, and to legal highways.

Signed this 25 day of July, 2017.

Jane J Samulowite

Jane I. Samulowitz

DULY ENTERED FOR TAXATION SUBJECT FINAL ACCEPTANCE FOR TRANSFER

Fire No.: 4037-106270

Page 1 of 2

AUG 28 2017

JOHN E. PETALAS LAKE COUNTY AUDITOR

041519

AMOUNT \$____CHARGE____CHECK#__4037113398

25 w

OVERAGE_____

NON-CONF_____

DEPUTY_

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Acknowledgement

State of Indiana; Tippecanoe County:

Before me, a Notary Public in and for the said County and State, personally appeared Jane I. Samulowitz, who acknowledged the execution of the foregoing Warranty Deed, and who, having been duly sworn, stated that any representations therein contained are true.

Witness my hand and notarial seal this 25 da

My commission expires:

9-16-23

Notary Public

County, Indiana

This instrument prepared by Louis Klatch, 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.

Name: JENNIFER L FEE

Grantee's Mailing Address and Mailing Address to

(must be a street address)

File No.: 4037-

106270

Page 2 of 2