STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 062222

2017 SEP 13 AM 9: 06

MICHAEL B. BROWN WARRANTY DEEDRECORDER

TAX: I.D. NO.: 45-27-01-327-005.000-007

THIS INDENTURE WITNESSETH, That GREGORY LEINWEBER AND RACHAEL A. LEINWEBER, HUSBAND AND WIFE, GRANTORS, of LAKE County in the State of INDIANA, CONVEYS AND WARRANTS to TANYA L. GUCA AND IDA G. GUCA, AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP, of LAKE County in the State of INDIANA, as GRANTEE 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:

LOTS 162, 169, 170, 177 AND 178 IN PON & CO'S WILDWOOD SHORES, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 26 PAGE 38, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

COMMONLY KNOWN AS: 5909 W. 249TH AVENUE, LOWELL, IN 46356

SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2016 TAXES PAYABLE 2017, 2017 TAXES PAYABLE 2018 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER

SUBJECT TO EASEMEN	NTS, RESTRICTIONS AND COVENANTS OF RECORD, IF ANY.
Dated this 5 day of Se	NOTOFFICIAL!
/	This Document is the property of
Dar Sulve	the Lake County Recorded Chamas
GREGORY LEINWEBER	RACHAEL, A. LEINWEBER
STATE OF <u>INDIANA</u>	CTOD
COUNTY OF LAKE	SS:
Before me, the undersigned, a Nota	ry Public in and for said County and State, this day of, 20/7, personally
appeared: GREGORY LEINWEI	BER AND RACHAEL A. LEINWEBER, and acknowledged the execution of the foregoing deed. In
	abscribed my name and affixed my official seal.
a To	25
My commission expires:	Signature of the Control of the Cont
Resident of	County Printed, Notary Public
	DARLEEN S. BIRCHEL Lake County Lake County
This instrument prepared by:	MATTHEW W. DEULLEY, Attorney at Law, ID No. 27813-25. My Commission Expires May 10, 2025
	No legal opinion given to definite. All information used in preparation of document was supplied by title company.
RETURN DEED TO: GRANTEE	

GRANTEE'S MAILING ADDRESS: 5909 W. 249TH AVENUE, LOWELL, IN 46356

SEND TAX BILLS TO: GRANTEE

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this

arless. Black.

document unless required by law.

Signature of Preparer

Printed Name of Preparer

COMMUNITY TITLE COMPANY FILENO_1712668

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DULY ENTERED FOR TAXATION SUBJECT FINAL ACCEPTANCE FOR TRANSFER

SEP 11 2017

JÖHN E. PETALAS PAKE CONTA YADILOU