

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2017 083434

2017 DEC -8 PM 1:59

**QUIT CLAIM DEED**

MICHAEL B. BROWN  
RECORDER

This indenture witnesseth that **LINDA LIVELY** (Grantor), quitclaims any interest she may have to to **LINDA LIVELY AND SHARRON TARBUTTON, AS JOINT TENANTS WITH RIGHTS OF SURVIVORSHIP** (Grantee) without consideration pursuant to I.C. 32-17-14-5 and I.C. 32-17-14-11(c), the following described real estate in Lake County, State of Indiana:

Legal Description: Lots 37 and 38, Block 35, Second Subdivision of East Gary, City of Lake Station, as shown in Plat Book 7, Page 25, in the Office of the Recorder of Lake County, Indiana  
Tax I.D. No.: 45-09-18-480-023.000-021  
Common Address: 2726 Grand Blvd., Lake Station, IN 46405

Subject to taxes, liens, and encumbrances of record.  
Tax bills should be sent to Grantee at such address unless otherwise indicated below.  
In witness whereof, Grantor has executed this deed this Wednesday, November 22, 2017.

Grantor:

DULY ENTERED FOR TAXATION SUBJECT  
FINAL ACCEPTANCE FOR TRANSFER

Signature *Linda Lively*  
Printed **LINDA LIVELY**

DEC 8 2017

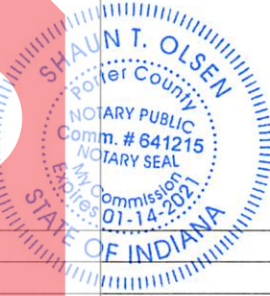
State of Indiana )  
                          )ss:  
County of Lake    )

JOHN E. PETALAS  
LAKE COUNTY AUDITOR

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

Witness my hand and Notarial Seal this Wednesday, November 22, 2017.

Signature *[Signature]*



Return Deed To: Linda Lively, 2726 Grand Blvd., Lake Station, IN 46405  
Grantee Address: Linda Lively, 2726 Grand Blvd., Lake Station, IN 46405  
Send Tax Bills To: Linda Lively, 2726 Grand Blvd., Lake Station, IN 46405

This instrument prepared by:



SHAUN T. OLSEN  
OLSEN LEGAL GROUP LTD.  
9111 Broadway, Ste. RR, Merrillville, IN, 46410  
219-778-5415

\*\*\*I affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. No representation is made as to any time after this instrument was delivered or given to our client.

*[Signature]*

25-  
3164  
RM

NO SALES DISCLOSURE NEEDED

43493

Approved Assessor's Office

By: *[Signature]*