

2020-028346

2020 May 21 11:11 AM

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
MICHAEL B BROWN
RECORDER

WARRANTY DEED

TAX: I.D. NO. 45-07-07-329-016.000-023

THIS INDENTURE WITNESSETH, That BRET RINDOKS AND APRIL M. RINDOKS, HUSBAND AND WIFE, (GRANTORS), of LAKE County in the State of INDIANA, CONVEY AND WARRANT to DANIEL F. FOX, (GRANTEE), of LAKE County in the State of INDIANA, 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 39 AND 40 IN BLOCK 4 IN WALTER ADDITION TO HAMMOND AS PER PLAT THEREOF RECORDED IN PLAT BOOK 10, PAGE 1, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

COMMONLY KNOWN AS: 1125 170TH STREET, HAMMOND, INDIANA 46324

SUBJECT TO SPECIAL ASSESSMENTS IF ANY, 2019 TAXES PAYABLE 2020, 2020 TAXES PAYABLE 2021 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.

SUBJECT TO EASEMENTS, RESTRICTIONS AND COVENANTS OF RECORD, IF DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER.

Dated this 12 day of May, 2020.

BRET RINDOKS

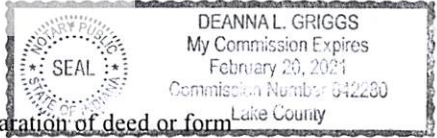
STATE OF INDIANA, COUNTY OF Lake SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 12 day of May, 2020, personally appeared: BRET RINDOKS AND APRIL M. RINDOKS and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

Commission Number: 642280
My commission expires: 2/2021
Resident of Lake County

Signature: [Signature]
Printed: DEANNA L. GRIGGS, Notary Public

This instrument prepared by: NATHAN D. VIS, Attorney at Law, ID No. 29535-45
VIS LAW, LLC, P.O. Box 980, Cedar Lake, IN 46303
No legal opinion given to Grantor(s) or Grantee(s) in preparation of deed or form of holding ownership. All information used supplied by title company.



RETURN DEED TO: GRANTEE
GRANTEE STREET OR RURAL ROUTE ADDRESS: 1125 170TH STREET, HAMMOND, INDIANA 46324
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 document unless required by law.

[Signature]
Signature

[Signature]
Printed Name

4625109
CK12249 013

Community Title Company
File No. 2018319

