

NOT AN OFFICIAL DOCUMENT

DULY ENTERED FOR TAXATION
SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

Nov 24 2021 VH

JOHN E. PETALAS
LAKE COUNTY AUDITOR

2021-540043
11/29/2021 09:54 AM
TOTAL FEES: 25.00
BY: JAS
PG #: 1

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
GINA PIMENTEL
RECORDER

WARRANTY DEED

TAX: I.D. NO. 45-19-32-227-003.000-037

THIS INDENTURE WITNESSETH, That PHYLLIS MOSER, (GRANTOR), of LAKE County in the State of INDIANA, CONVEY AND WARRANT to LOUIS T. DEL COIRO, (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:

LOT 1, EUTAENIA ACRES, AN ADDITION TO LAKE COUNTY, AS SHOWN IN PLAT BOOK 49, PAGE 118, IN LAKE COUNTY, INDIANA.

COMMONLY KNOWN AS: 19104 WICKER AVENUE, LOWELL, INDIANA 46356

SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2020 TAXES PAYABLE 2021, 2021 TAXES PAYABLE 2022 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.

SUBJECT TO EASEMENTS, RESTRICTIONS AND COVENANTS OF RECORD, IF ANY.

Dated this 12 day of November, 2021.

Phyllis Moser
PHYLLIS MOSER

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 November, 2021, personally appeared: PHYLLIS MOSER and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

Commission Number: 72484

My commission expires: 12/11/2021 Signature: Tia Lipscomb
Resident of Lake County Printed Tia Lipscomb, 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: GRANTEES
GRANTEE STREET OR RURAL ROUTE ADDRESS: 19104 WICKER AVENUE, LOWELL, INDIANA 46356
SEND TAX BILLS TO: GRANTEES

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

Tia Lipscomb
Printed Name

