NOT AN OFFICIAL DOCUMENT

2021-541891 12/09/2021 02:07 PM TOTAL FEES: 25.00 BY: JAS PG #: 1

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STATE OF INDIANA LAKE COUNTY FILED FOR RECORD GINA PIMENTEL RECORDER

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

Dec 08 2021 SLG JOHN E. PETALAS LAKE COUNTY AUDITOR

WARRANTY DEED

TAX: I.D. NO. 45-17-04-154-015.000-047

STATE OF INDIANA, COUNTY OF

name and affixed my official seal.

THIS INDENTURE WITNESSETH, That ARSHAD HABIB (GRANTOR), of LAKE County in the State of INDIANA, CONVEYS AND WARRANTS to JENETTE RUDY, ROBIN BROKAW, and THOMAS MATUSZEWSKI, JOINT TENANTS, (GRANTEES), 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 25, DOUBLETREE LAKE ESTATES PHASE 1, IN THE TOWN OF WINFIELD, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 84, PAGE 43, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

COMMONLY KNOWN AS: 8397 DOUBLETREE CT., CROWN POINT, INDIANA 46307

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.

	07	Signature	ustus Ke	25		
Resident of Horter	County	Printed CHO'S	tinakleglei	700	_, Notary Public	
This instrument prepared by:	VISTAW LLC	Attorney at Law, II	den I else INI 46202	E	CRISTINA KEGLI NOTARY PUBLI SEAL	C
	No legal opinion	given to Grantor	c) or Grantag(e) in pra	paration of de itle company	ed o RIATE OF INDIANA Y COMMISSION EXPIRES JULY OMMISSION NUMBER NE	1 06, 2022 1 0654807

appeared: ARSHAD HABIB, and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my

RETURN DEED TO: GRANTEES

GRANTEE STREET OR RURAL ROUTE ADDRESS: 8397 DOUBLETREE CT., CROWN POINT, INDIANA 46307
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 de€timent unless required by law

Signature Printed Name Kegley

Before me, the undersigned, a Notary Public in and for said County and State, this

COMMUNITY TITLE COMPANY FILE NO. 2/2357