NOT AN OFFICIAL DOCUMENT

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

> Mar 30 2022 SLG JOHN F PETALAS LAKE COUNTY AUDITOR

2022-513492 03/30/2022 01:25 PM TOTAL FEES: 25.00 BY: SP PG #: 1

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD GINA PIMENTEL RECORDER

FILENO, 2 J

WARRANTY DEED

TAX: LD. NO. 45-11-18-302-012.000-034

THIS INDENTURE WITNESSETH THAT, CYNTHIA A. GRZYWANA A/K/A CYNTHIA A. STINCIC, (GRANTOR). of LAKE County in the State of INDIANA, CONVEYS AND WARRANTS TO JASON A. NOWAK AND HARLENE HARO. HUSBAND AND WIFE, of LAKE County in the State of INDIANA, (GRANTEES), 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 27 IN SCHILLING'S 7TH ADDITION, UNIT 2. TO THE TOWN OF DYER, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 47 PAGE 1. IN THE OFFICE OF THE RECORDER OF LAKE COUNTY. INDIANA.

COMMONLY KNOWN AS: 2600 HICKORY DR., DYER, IN 46311

CYNTHIA A. GRZYWANA A/K/A CYNTHIA A. STINCIC

RETURN DEED TO: GRANTEES

SEND TAX BILLS TO: GRANTEES

SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2021 TAXES PAYABLE 2022, 2022 TAXES PAYABLE 2023 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.

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

STATE OF Fedian	, COUNTY OF	Lake ss:	h a	
Before me, the undersigned, a No personally appeared: CYNTHIA foregoing deed. In witness where	A. GRZYWANA A/K/A	CYNTHIA A. STINCIC and	day of, 20_ acknowledged the execution of the chal seal.	<u> </u>
Commission Number: Commission expires: Resident of Commission expires:	99646 57021 de	Signature Printed Dance S	S. r., Notary Pub	blic
VIS LAW, LLC, P.O. Bo No legal opinion given to		mey at Law, ID No. 29535-45 ox 980, Cedar Lake, IN 46303 o Grantor(s) or Grantee(s) in orm of holding ownership. All ed by title company.	DARLEEN S I My Commission Name May 10 Commission Name Lake Co	n Expires 2025 er NPC699846
RETURN DEED TO: GRANTEES			COMMUNITY	TLE COMPA

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.

1an S Birke' Printed Name Signature

GRANTEE STREET OR RURAL ROUTE ADDRESS: 2600 HICKORY DR., DYER. IN 46311