DULY ENTERED FOR TAXATION SUBJECT FINAL ACCEPTANCE FOR TRANSFER

STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED

11:32 AM 2024 Feb 1

FEB 0 1 2024

PEGGY HOLINGA KATONA

Space above this line	for recorder's use only	
Prepared By: Name: Louis Stevorich Address: 1106 E Cambridge Dr Schererville, In. 46375 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.	After Recording Return To: Name: Louis Stevovich Address: 1106 E Cambridge Dr Schererville, In. 46375	=

INDIANA QUIT CLAIM DEED

COONTT		9
THIS INDENTURE WITNESSETH, that for NONE	or and in cons	ideration of the sum of
Louis Stevovich	, a	, residing at
1106 E Cambridge Dr, Schererville, In. 46375	5	0,
(hereinafter known as the "Grantor(s)") he	ereby remise,	release, and forever quitclaim to
Vesna Balac	, a	, whose mailing address is
1106 E Cambridge Dr. Schererville, In. 46375	5	
(hereinafter known as the "Grantee(s)") all	the rights, title	e, interest, and claim in or to the
following described real estate, situated in	n LAKE	County, Indiana, to-wit:

eSign

STATE OF INDIANA



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25,0

Lot 47, Stonebridge Estates, Phase One, and addition to the Town of Schererville, as per plat therof, recorded in Plat Book 92, page 23, in the Office of the Recorder of Lake County, Indiana.

More commonly known as: 1106 E Cambridge Dr, Schererville, In. 46375

Tax id: 45-11-08-255-010.000-036

Property address is: 1106 E Cambridge Dr. Schererville, In. 46375

WRITE LEGAL DESCRIPTION HERE OR ATTACH AND INSERTI

To have and to hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity, and claim whatsoever for the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

Grantor's Signature

Louis Stevovich

Grantor's Name 1106 E Cambridge Dr

Street Address

Schererville, In. 46375 City, State & ZIP

Preparer's Signature

Louis Stevovich Preparer's Name

Security Number in this document, unless required by law 4.4.

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social

Grantee's address/mailing address to which tax statements should be mailed is: 1106 E Cambridge Dr. Schererville, In. 46375

Grantor's Signature
Grantor's Name

Street Address

City, State & ZIP

ecorde

STATE OF Indiana
STATE OF 111010110C COUNTY OF Lake
I, the undersigned, ain and for said County, in said State, hereby certify that Steve vich whose names are signed to the foregoing
instrument, and who is known to me, acknowledged before me on this day that, being informed
of the contents of the instrument, they executed the same voluntarily on the day the same bears
date.
Given under my hand this 02/02/1024 (mm/dd/yyyy).
Soenfuller
Officer
My Commission Expires: June 28, 2024
My Commission Expires: June 28, 2024
SUZANNE S. SULLIVAN Notary Public, State of Indians
SEAL) Commission Number NP0897383
wy Construction Express ()
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eSign

Property or lake County Recorder