NOT AN OFFICIAL

272. 5052.4 0 //0) /202. 1:25 M THE CLINT TATAL SEE: 5.00 HILED-FOR ECORD

BY: JAS GINA PIMENTEL
PG #: 1 RECORDER
RECORDED AS PRESENTED

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

Feb 01 2024 BDD

PEGGY HOLINGA-KATONA LAKE COUNTY AUDITOR

WARRANTY DEED

TAX: I.D. NO. 45-11-26-229-008.000-032

DAVID M. COTTON

STATE OF INDIANA, COUNTY OF LOAK !

SEND TAX BILLS TO: GRANTEES

THIS INDENTURE WITNESSETH, That DAVID M. COTTON AND MAUREEN A. COTTON, HUSBAND AND WIFE, (GRANTORS), of LAKE County in the State of INDIANA, CONVEY AND WARRANT to KYLE HOLMES AND ASHLEY HOLMES, HUSBAND AND WIFE, (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 309 IN HEATHER HILLS, SECTION 3, UNIT 1, IN THE TOWN OF SCHERERVILLE, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 69, PAGE 53, AND AMENDED BY PLAT OF CORRECTION RECORDED IN PLAT BOOK 71, PAGE 36, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

COMMONLY KNOWN AS: 8584 WHEELER PL., CROWN POINT, IN 46307

SUBJECT TO SPECIAL ASSESSMENTS, IF ANY, 2023 TAXES PAYABLE 2024, 2024 TAXES PAYABLE 2025 AND ALL REAL ESTATE TAXES DUE AND PAYABLE HEREAFTER.

MAUREEN A. COTTON

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

GRANTEE STREET OR RURAL ROUTE ADDRESS: 8584 WHEELER PL., CROWN POINT, IN 46307

| Before me, the undersigned, a Notary Public in and for said County and State, this | | | |
|--|--|--|--|
| Commission Number: 724041 | | | |
| My commission expires: 1311 5027 Signature WW | | | |
| Resident of Lake | County Printed TO UDSCOMB, 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 Grante(e(s)) in preparation of Grant Commission Number No. 2020/001 | | |
| | of holding ownership. All information used supplied by title company. | | |
| RETURN DEED TO: GRANTEES | | | |

| I affirm, under the penalties for p | erjury, that I have taken reasonable care to re | edact each Social Security number in |
|-------------------------------------|---|--------------------------------------|
| < hm/ | Tia liescomb | COMMUNITY TITLE COMPANY |
| Signature | Printed Name | FILE NO <u>232</u> 7/70 |