

NAME _____

Parcel Number _____

ADDRESS _____

DESCRIPTION _____

Key Number _____

TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART	TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART



32-04-15-200-016.000-007
04-1-15-72W 200-016

NAME ~~RICHARDSON ERIC M & DAWNE C~~

04-EEL RIVER

Parcel Number

5425 LOWERY STREET
ADDRESS JAMESTOWN IN 46147

PT NE 1/4 15-17-2W
1.41AC DESCRIPTION

Key Number _____

99/00 SPLIT CAME FROM 200-004 9-8-98 WD

TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART	TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART
JANITZ, LYNN & JANICE H/W 5425 LOWERY ST., JAMESTOWN, IN 46147	1-20-04	2-12-04	WD	ALL					

NAME MCGUINNESS EDWARD D
4036 N SR 75

Parcel Number 04-2-17-62W 400-013

ADDRESS N Salem

PT SW $\frac{1}{4}$ SE $\frac{1}{4}$ 17-16-2W 2.16A
 DESCRIPTION

Key Number EEL RIVER 17-14-3

11-21-90 QCD

TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART	TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART
JOHNSTON, WILLIAM J. & MICHELE 4036 ST.RD. 75, NORTH SALEM, INDIANA 46165	A. HW 12/19/91	12/26/91	WD	ALL					
JOHNSTON, Michele A. 4036 N. State Road 75, North Salem, IN 46165	07-30-98	07-30-98	Sur. Aff.	ALL					
99/00 SPLIT ALL WENT TO MP 785 451-001	7-13-98	8-3-98	PLAT	ALL					

FOR REFERENCE ONLY
 ALL WENT TO OTHER PARCELS

NAME _____

Parcel Number _____

ADDRESS _____

DESCRIPTION _____

Key Number _____

TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART	TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART

32-05-08-200-001.000-007
 04-2-08-62W 200-001
 JONES WILLIAM R

4-EEL RIVER

NAME ~~SELLERS OPAL F & JONES WILLIAM~~
 6167 N 725 W
 NORTH SALEM IN
 ADDRESS 46165

PT N NE 8-16-2W
 43.68A

Parcel Number
 4.8-3-1
 Key Number

DESCRIPTION

TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART	TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART
JONES, William R. 6167 N. 725 W., North Salem 46165	3-8-94	3-10-94	Aff.Surv.	All					

NAME _____

Parcel Number _____

ADDRESS _____

DESCRIPTION _____

Key Number _____

TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART	TRANSFERS TO	DATE OF INST'NT	DATE OF TRANSFER	KIND OF INST'NT	ALL OR PART

