



SALES DISCLOSURE FORM

State Form 46021 (R11/12-11)
 Prescribed by Department of Local Government Finance
 Pursuant to IC 6-1.1-5.5

SDF ID

49	2019	6766082
----	------	---------

 County Year Unique ID

SDF Date: 03/25/2019

PRIVACY NOTICE: The telephone numbers of the parties on this form are confidential according to IC 6-1.1-5.5-3(d).

PART 1 - To be completed by BUYER/GRANTEE and SELLER/GRANTOR
A. PROPERTY TRANSFERRED - MUST BE CONVEYED ON A SINGLE CONVEYANCE DOCUMENT

1. Property Number	Check box if applicable to parcel	5. Complete Address of Property	6. Complete Tax Billing Address (if different from property address)
Parcel Number: 49-03-29-105-166.000-600	<input type="checkbox"/> 2. Split <input checked="" type="checkbox"/> 3. Land <input type="checkbox"/> 4. Improvement	2789 Emerald St Indianapolis, IN 46268	2900 East 96th Street, Suite B Indianapolis, IN 46240

7. Legal Description:
 AUGUSTA HEIGHTS SEC 1, Block T, Lot 8, Marion County

B. CONDITIONS - IDENTIFY ALL THAT APPLY **C. SALES DATA - DISCLOSE VALUE OF ITEMS LISTED IN TABLE B, ITEMS 1 - 15**

- If condition 1 applies, filer is subject to disclosure and a disclosure filing fee*
- 1. A transfer of real property interest for valuable consideration.
 - 2. Buyer is an adjacent property owner.
 - 3. Vacant land.
 - 4. Exchange for other real property. ("Trade")
 - 5. Seller paid points. *(Provide the value Table C Item 12.)*
 - 6. Change planned in the primary use of the property? *(Describe in special circumstances in Table C Item 3)*
 - 7. Existence of family or business relationship between buyer and seller. *(Complete Table C Item 4)*
 - 8. Land contract. Contract term (YY): 0
Land Contract Date (MM/DD/YYYY):
 - 9. Personal property included in transfer. *(Provide the value Table C Item 5.)*
 - 10. Physical changes to property between March 1 and date of sale. *(Describe in special circumstances in Table C Item 3)*
 - 11. Partial interest. *(Describe in special circumstances in Table C Item 3)*
 - 12. Easements or right-of-way grants.

1. Conveyance date (MM/DD/YYYY): 03/22/2019
2. Total Number of parcels: 1
3. Describe any unusual or special circumstances related to this sale, including the specification of any less-than-complete ownership interest and terms of seller financing.
- See attachments for additional applicable circumstances*

- If conditions 13 - 15 apply, filers are subject to disclosure, but no disclosure filing fee.*
- 13. Document for compulsory transactions as result of foreclosure or express threat of foreclosure, divorce, court order, judgment, condemnation, or probate.
 - 14. Documents involving the partition of land between tenants in common, joint tenants, or tenants by the entirety.
 - 15. Transfer to a charity, not-for-profit organization, or government.

- 4. Family or business relationship existing between buyer and seller? Amount of discount: \$0.00
Disclose actual value in money, property, a service, an agreement, or other consideration.
- | | |
|--|------------|
| 5. Estimated value of personal property: | \$0.00 |
| 6. Sales price: | \$3,000.00 |
- 7. Is the seller financing sale? If yes, answer questions (8-13)
 - 8. Is buyer/borrower personally liable for loan?
 - 9. Is this a mortgage loan?
- | | |
|--------------------------|---------|
| 10. Amount of loan: | \$0.00 |
| 11. Interest rate: | 0.0000% |
| 12. Amount in points: | \$0.00 |
| 13. Amortization Period: | 0 |

D. PREPARER

Misty M. Gears
Preparer of the Sales Disclosure Form
 365 East Thompson Road
Address (Number and Street)
 Indianapolis, IN 46227-1624
City, State, and ZIP Code

Closer
Title
 Royal Title Services
Company
 Telephone Number E-mail

E. SELLER(S)/GRANTOR(S)

Mary Ellen Jones
Seller - Name as appears on conveyance document
 409 Roberts
Address (Number and Street)
 Indianapolis, IN 46227
City, State, and ZIP Code
 Telephone Number E-mail

Melissa Barnes
Seller - Name as appears on conveyance document
 409 Roberts
Address (Number and Street)
 Indianapolis, IN 46227
City, State, and ZIP Code
 Telephone Number E-mail

Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act".

Signature of Seller
 Printed Name of Seller Sign Date (MM/DD/YYYY)

Signature of Seller
 Printed Name of Seller Sign Date (MM/DD/YYYY)

F. BUYER(S)/GRANTEE(S) - APPLICATION FOR DEDUCTIONS AND CREDITS - IDENTIFY ALL ITEMS THAT APPLY

Apex Realty Group LLC
Buyer - Name as appears on conveyance document
 2900 East 96th Street, Suite B
Address (Number and Street)
 Indianapolis, IN 46240
City, State, and ZIP Code
 Telephone Number E-mail E-mail Tax Bill (Y/N)

Buyer - Name as appears on conveyance document
 Address (Number and Street)
 City, State, and ZIP Code
 Telephone Number E-mail E-mail Tax Bill (Y/N)

THE SALES DISCLOSURE FORM MAY BE USED TO APPLY FOR CERTAIN DEDUCTIONS FOR THIS PROPERTY. IDENTIFY ALL OF THOSE THAT APPLY

1. Will this property be the buyer's primary residence? Provide complete address of primary residence, including county:
 2900 East 96th Street, Suite B
Address (Number and Street)
 Indianapolis, IN 46240 0
City, State, and ZIP Code County
 2. Does the buyer have a homestead to be vacated for this residence? If yes, provide complete address of residence being vacated, including county:
 Address (Number and Street)
 City, State, and ZIP Code 98
City, State, and ZIP Code County

3. Homestead
 4. Solar Energy Heating/Cooling System
 5. Wind Power Device
 6. Hydroelectric Power Device
 7. Geothermal Energy Heating/Cooling Device
 8. Is this property a residential rental property?
 9. Would you like to receive tax statements for this property via e-mail? (Provide contact information below. Please see the instructions for more information. Not available in all counties.)
 Primary property owner contact name E-mail

Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act". (Note: Spouse Information, Social Security and Driver's License/other numbers are not necessary if no Homestead Deduction is being filed.)

Signature of Buyer
 Printed Name of Buyer Sign Date (MM/DD/YYYY)
 Last 5 digits of Buyer 1 Driver's License/ID/Other Number State Last 5 Digits of Social Security Number

Signature of Buyer / Spouse
 Printed Name of Buyer / Spous Sign Date (MM/DD/YYYY)
 Last 5 digits of Buyer 2/Spouse Driver's License/ID/Other Number State Last 5 Digits of Social Security Number

PART 2 - COUNTY ASSESSOR

The county assessor must verify and complete items 1 through 14 and stamp the sales disclosure form before sending to the auditor:

1. Parcel	2. AV Land	3. AV Improvement	4. AV Personal Property	5. Total AV	6. Property Class Code	7. Neighborhood Code	8. Tax District	9. Acreage

<p>Assessor Stamp</p>	<p>10. Identify physical changes to property between March 1 and date of sale.</p>	<p><input type="checkbox"/> 11. Is form completed?</p> <p><input type="checkbox"/> 12. Sales fee required?</p> <p>13. Date of sale (MM/DD/YYYY): _____</p> <p>14. Date form received (MM/DD/YYYY): _____</p>
------------------------------	--	--

Items 15 through 18 are to be completed by the assessor when validating this sale:

<p>15. If applicable, identify any additional special circumstances relating to validation of sale.</p>	<p><input type="checkbox"/> 16. Sale valid for trending?</p> <p><input type="checkbox"/> 17. Validation of sale complete?</p> <p>18. Validated by: _____</p>
---	--

PART 3 - COUNTY AUDITOR

<p>Auditor Stamp</p>	<p>1. Disclosure fee amount collected: _____</p> <p>2. Other Local Fee: _____</p> <p>3. Total Fee Collected: _____</p> <p>4. Auditor receipt book number: _____</p> <p>5. Date of transfer (MM/DD/YYYY): _____</p>	<p><input type="checkbox"/> 6. Is form completed?</p> <p><input type="checkbox"/> 7. Is fee collected?</p> <p><input type="checkbox"/> 8. Attachments complete?</p>
-----------------------------	--	---

PART 4 - RECEIPT FOR STATEMENT OF CREDIT/DEDUCTION OF ASSESSED VALUATION

<p>_____ SDF ID _____ SDF Date (MM/DD/YYYY)</p> <p>_____ Parcel Number</p>	<p>_____ Buyer 1 - Name as appears on conveyance document</p> <p>_____ Address of Property (Number and Street)</p> <p>_____ City, State, and ZIP Code of Property</p>
<p>Check All that Apply:</p> <p><input type="checkbox"/> Homestead <input type="checkbox"/> Solar Energy <input type="checkbox"/> Wind Power</p> <p><input type="checkbox"/> Hydroelectric <input type="checkbox"/> Geothermal <input type="checkbox"/> Rental Property</p> <p><input type="checkbox"/> Electronic statement (e-mail) _____</p>	<p>_____ Auditor Signature _____ Date (MM/DD/YYYY)</p>

A person who knowingly and intentionally falsifies value of transferred real property, or omits or falsifies any information required to be provided in the sales disclosure form commits a Class C felony.

E. SELLERS(S)/GRANTOR(S) - CONTINUED

Judith Ann Davee

Seller - Name as appears on conveyance document

409 W Roberts

Address (Number and Street)

Indianapolis, IN 46227

*City, State, and ZIP Code**Telephone Number**E-mail*

Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act".

*Signature of Seller**Printed Name of Seller**Sign Date (MM/DD/YYYY)*

Stephen David Curd

Seller - Name as appears on conveyance document

510 Cherry St

Address (Number and Street)

Beech Grove, IN 46107

*City, State, and ZIP Code**Telephone Number**E-mail*

Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act".

*Signature of Seller**Printed Name of Seller**Sign Date (MM/DD/YYYY)*