

Don R. Wallick Auctions, Inc.

965 N. Wooster Avenue - Strasburg, Ohio 44680 - www.WallickAuctions.com
Toll Free: 1-866-348-9446 - Tel: 330-878-0075 - Fax: 330-878-7318



THE TUSCARAWAS COUNTY TITLE COMPANY

203 Fair Avenue N.E. - P. O. Box 548
New Philadelphia OH 44663
Phone: (330) 364-4450 Fax: (330) 343-2976
Email: tusctitle@tusctitle.net

TAX AND LEGAL REPORT

DATE: March 23, 2010

REQUESTED BY: Don Wallick Wallick Auctions

PROPERTY ADDRESS: 237 Second St., S.W. New Philadelphia Ohio

PRESENT OWNER: Huff Family Limited Partnership, dated April 13, 1998, an Ohio Limited Partnership

VOLUME: 1022

PAGE: 983

TRANSFER: July 9, 2001

PARCEL NO: 43-02381.000

=====

REAL ESTATE TAXES ARE CURRENTLY LISTED ON THE 2008 TAX DUPLICATE IN THE NAME OF

Huff Family Limited Partnership, dated April 13, 1998,
an Ohio Limited Partnership

PARCEL NO.: 43-02381.000

DESC. S End 16

VALUATIONS:

LAND: 790
BUILDING: 2180
TOTAL: 2970
AUV:

TAXES:

GENERAL TAXES: \$ 886.47
TAX REDUCTION: \$ - 321.74
10 % ROLLBACK: \$ - 56.47
2 1/2% REDUCTION \$ - 14.12
HOMESTEAD CREDIT \$
TOTAL PER 1/2 YEAR \$ 494.14
UNPAID REAL \$
CURRENT SA: \$ 6.00
PENALTY: \$
PRIOR DEL: \$
TOTAL DUE: \$ 1728.16

Special Assessments: MWCD

Taxes for the first half year 2009 are DELINQUENT.
Taxes for the second half year 2009 are determined but not yet due.

Approved by Tuscarawas County Map Office: _____

NOT APPROVED BY TUSCARAWAS COUNTY MAP OFFICE : _____ (RED STAMPED) WILL NOT TRANSFER WITHOUT NEW SURVEY PERFORMED.

BY: Jessica Murphy

PRIOR FILE NO.

THE TUSCARAWAS COUNTY TITLE COMPANY

203 Fair Avenue N.E. - P. O. Box 548
New Philadelphia OH 44663
Phone: (330) 364-4450 Fax: (330) 343-2976
Email: tusctitle@tusctitle.net

TAX AND LEGAL REPORT

DATE: March 23, 2010

REQUESTED BY: Don Wallick Wallick Auctions

PROPERTY ADDRESS: 237 Second St., S.W. Rear New Philadelphia Ohio

PRESENT OWNER: Huff Family Limited Partnership, dated April 13, 1998, an Ohio Limited Partnership

VOLUME: 1022

PAGE: 983

TRANSFER: July 9, 2001

PARCEL NO: 43-02382.000

=====

REAL ESTATE TAXES ARE CURRENTLY LISTED ON THE 2008 TAX DUPLICATE IN THE NAME OF

Huff Family Limited Partnership, dated April 13, 1998, an Ohio Limited Partnership

PARCEL NO.: 43-02382.000

DESC. PR 15

VALUATIONS:

LAND: 790
BUILDING: 2180
TOTAL: 2970
AUV:

Special Assessments: None

TAXES:

GENERAL TAXES: \$ 96.63
TAX REDUCTION: \$ - 34.71
10% ROLLBACK: \$ - 6.09
2 1/2% REDUCTION \$
HOMESTEAD CREDIT \$
TOTAL PER 1/2 YEAR \$ 54.83
UNPAID REAL \$
CURRENT SA: \$
PENALTY: \$
PRIOR DEL: \$
TOTAL DUE: \$ 189.46

Taxes for the first half year 2009 are delinquent.

Taxes for the second half year 2009 are determined but not yet due.

Approved by Tuscarawas County Map Office: _____

NOT APPROVED BY TUSCARAWAS COUNTY MAP OFFICE : _____ (RED STAMPED) WILL NOT TRANSFER WITHOUT NEW SURVEY PERFORMED.

BY: Jessica Murphy

PRIOR FILE NO.

43-0521-000
 624-332 9-30-1998
 24,110.03.30
 85
 43-00467-000
 624-332 9-30-1998
 24,110.03.29
 83
 100.00.00.00
 100.00.00.00

BANK I
 374-21E 129.64
 ZIMMERMAN DONALD V
 43-05778-000
 1140-281
 24,110.03.20
 8
 77-0317 V 100.00
 7/1/2005
 24,110.03.28.000
 43-02770-000
 1193-1414
 0.000
 43-02770-000
 1193-1414
 0.000
 43-02770-000
 1193-1414
 0.000
 43-02770-000
 1193-1414
 0.000

FRAGASSE DORLAN
 43-02398-000
 734-459 10 8-13-
 .00
 24,110.03.18.000
 264
 264
 RG & P UHRICHSVILLE LL
 43-06213-000
 1827-17
 0.000
 6/14/2006
 24,110.03.18.000
 264

43-00339-001
 1290-1796 7/25/2006
 24,110.03.39.01
 66.2
 43-00339-001
 1290-1796 7/25/2006
 24,110.03.39.01
 66.2
 43-00339-001
 1290-1796 7/25/2006
 24,110.03.39.01
 66.2
 43-00339-001
 1290-1796 7/25/2006
 24,110.03.39.01
 66.2

FIRST DR SW
 43-02317-000
 1140-281
 24,110.03.11
 1-20-2004
 1335
 43-02317-000
 1140-281
 24,110.03.11
 1-20-2004
 1335
 43-02317-000
 1140-281
 24,110.03.11
 1-20-2004
 1335
 43-02317-000
 1140-281
 24,110.03.11
 1-20-2004
 1335

BURKHART LETHA M
 43-01207-000
 5-6-1974
 24,110.03.14
 42.5
 43-00005-000
 1281-647
 24,110.03.13.000
 4/8/2008 0.000
 43-00005-000
 1281-647
 24,110.03.13.000
 4/8/2008 0.000

43-04086-000
 10-10-1994
 24,110.03.41.00
 49.99
 43-04086-000
 10-10-1994
 24,110.03.41.00
 49.99
 43-04086-000
 10-10-1994
 24,110.03.41.00
 49.99
 43-04086-000
 10-10-1994
 24,110.03.41.00
 49.99

SCHWARTZ GEORGE E & BARBARA J
 43-04502-000
 1159-1449
 24,110.03.10
 100
 43-04502-000
 1159-1449
 24,110.03.10
 100
 43-04502-000
 1159-1449
 24,110.03.10
 100
 43-04502-000
 1159-1449
 24,110.03.10
 100

CDX WILLIAM
 43-05501-000
 1233-1048 1/28/2010
 24,110.03.7
 0.201 254
 43-05501-000
 1233-1048 1/28/2010
 24,110.03.7
 0.201 254

SECOND ST SW
 43-02186-000
 678-633 3-3-1994
 24,110.03.6
 43-02186-000
 678-633 3-3-1994
 24,110.03.6
 43-02186-000
 678-633 3-3-1994
 24,110.03.6
 43-02186-000
 678-633 3-3-1994
 24,110.03.6

HMT FAMILY LIMITED PARTNERSHIP
 43-02381-000
 1022-2293 7-9-2001
 24,110.03.3
 99 00
 43-02381-000
 1022-2293 7-9-2001
 24,110.03.3
 99 00
 43-02381-000
 1022-2293 7-9-2001
 24,110.03.3
 99 00

FRAGASSE BARBARA SUE
 43-04687-000
 8-10-1994
 24,110.03.1
 99 00
 43-04687-000
 8-10-1994
 24,110.03.1
 99 00
 43-04687-000
 8-10-1994
 24,110.03.1
 99 00

43-00339-000
 1290-1796 7/25/2006
 24,110.03.42
 129 24,110.03.42
 11-29-1993
 43-00339-000
 1290-1796 7/25/2006
 24,110.03.42
 129 24,110.03.42
 11-29-1993

FRAGASSE PATRICIA
 43-03567-000
 10-20-1994
 24,110.03.36
 686-459
 43-03567-000
 10-20-1994
 24,110.03.36
 686-459
 43-03567-000
 10-20-1994
 24,110.03.36
 686-459

43-02186-000
 678-633 3-3-1994
 24,110.03.6
 43-02186-000
 678-633 3-3-1994
 24,110.03.6
 43-02186-000
 678-633 3-3-1994
 24,110.03.6

43-02382
43-02381



AGENCY DISCLOSURE STATEMENT



The real estate agent who is providing you with this form is required to do so by Ohio law. You will not be bound to pay the agent or the agent's brokerage by merely signing this form. Instead, the purpose of this form is to confirm that you have been advised of the role of the agent(s) in the transaction proposed below. (For purposes of this form, the term "seller" includes a landlord and the term "buyer" includes a tenant.)

Property Address: 237 Second SW New Philadelphia
Buyer(s): _____
Seller(s): ELEANOR HUFF

I. TRANSACTION INVOLVING TWO AGENTS IN TWO DIFFERENT BROKERAGES

The buyer will be represented by _____, and _____
AGENT(S) BROKERAGE
The seller will be represented by _____, and _____
AGENT(S) BROKERAGE

II. TRANSACTION INVOLVING TWO AGENTS IN THE SAME BROKERAGE

If two agents in the real estate brokerage _____ represent both the buyer and the seller, check the following relationship that will apply:

- Agent(s) _____ work(s) for the buyer and Agent(s) _____ work(s) for the seller. Unless personally involved in the transaction, the broker and managers will be "dual agents", which is further explained on the back of this form. As dual agents they will maintain a neutral position in the transaction and they will protect all parties' confidential information.
- Every agent in the brokerage represents every "client" of the brokerage. Therefore, agents _____ and _____ will be working for both the buyer and seller as "dual agents". Dual agency is explained on the back of this form. As dual agents they will maintain a neutral position in the transaction and they will protect all parties' confidential information. Unless indicated below, neither the agent(s) nor the brokerage acting as a dual agent in this transaction has a personal, family or business relationship with either the buyer or seller. *If such a relationship does exist, explain:* _____

III. TRANSACTION INVOLVING ONLY ONE REAL ESTATE AGENT

Agent(s) DON R. WALLICK and real estate brokerage PISSOCIA - MATHEW will
 be "dual agents" representing both parties in this transaction in a neutral capacity. Dual agency is further explained on the back of this form. As dual agents they will maintain a neutral position in the transaction and they will protect all parties' confidential information. Unless indicated below, neither the agent(s) nor the brokerage acting as a dual agent in this transaction has a personal, family or business relationship with either the buyer or seller. *If such a relationship does exist, explain:* _____

represent only the (check one) seller or buyer in this transaction as a client. The other party is not represented and agrees to represent his/her own best interest. Any information provided the agent may be disclosed to the agent's client.

CONSENT

I (we) consent to the above relationships as we enter into this real estate transaction. If there is a dual agency in this transaction, I (we) acknowledge reading the information regarding dual agency explained on the back of this form.

BUYER/TENANT _____ DATE _____
BUYER/TENANT _____ DATE _____

P. Eleanor James 3-22-10
SELLER/LANDLORD _____ DATE _____
SELLER/LANDLORD _____ DATE _____



Effective 1/1/07

STATE OF OHIO
DEPARTMENT OF COMMERCE

RESIDENTIAL PROPERTY DISCLOSURE FORM

Pursuant to section 5302.30 of the Revised Code and rule 1301:1-4-10 of the Administrative Code.
TO BE COMPLETED BY OWNER (Please Print)

Property Address: 237 Second St SW
New Philadelphia, Ohio 44663

Owner's Name(s): Huff Family Limited Partnership / James L Huff executor

Date: August 27, 2009

Owner is is not occupying the property. If owner is occupying the property, since what date: _____

Purpose of Disclosure Form: This is a statement of the condition of the property and of information concerning the property actually known by the owner as required by Ohio Revised Code Section 5302.30. Unless otherwise advised in writing by the owner, the owner, other than having lived at or owning the property, possesses no greater knowledge than that which could be obtained by a careful inspection of the property by a potential purchaser. Unless otherwise advised, owner has not conducted any inspection of generally inaccessible areas of the property. THIS STATEMENT IS NOT A WARRANTY OF ANY KIND BY THE OWNER OR BY ANY AGENT OR SUBAGENT REPRESENTING THE OWNER OF THE PROPERTY. THIS STATEMENT IS NOT A SUBSTITUTE FOR ANY INSPECTIONS. POTENTIAL PURCHASERS ARE ENCOURAGED TO OBTAIN THEIR OWN PROFESSIONAL INSPECTION.

Owner's Statement: The representations contained on this form are made by the owner and are not the representations of the owner's agent or subagent. This form and the representations contained in it are provided by the owner exclusively to potential purchasers in a transfer made by the owner, and are not made to purchasers in any subsequent transfers. The information contained in this disclosure form does not limit the obligation of the owner to disclose an item of information that is required by any other statute or law to be disclosed in the transfer of residential real estate. For example, although some questions are limited to the past five years material problems or defects that occurred over five years ago that have not been fully corrected are required to be disclosed.

Instructions to Owner: (1) Answer ALL questions. (2) Identify any material matters in the property that are actually known. (3) Attach additional pages with your signature if additional space is needed. (4) Complete this form yourself. (5) If some items do not apply to your property, write NA (not applicable). If the item to be disclosed is not within your actual knowledge, indicate Unknown.

THE FOLLOWING STATEMENTS OF THE OWNER ARE BASED ON OWNER'S ACTUAL KNOWLEDGE

A) WATER SUPPLY: The source of water supply to the property is (check appropriate boxes):

- | | | |
|--|---------------------------------------|--------------------------------------|
| <input checked="" type="checkbox"/> Public Water Service | <input type="checkbox"/> Holding Tank | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Private Water Service | <input type="checkbox"/> Cistern | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Private Well | <input type="checkbox"/> Spring | _____ |
| <input type="checkbox"/> Shared Well | <input type="checkbox"/> Pond | _____ |

Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water?
 Yes No If "Yes", please describe: _____

Is the quantity of water sufficient for your household use? (NOTE: water usage will vary from household to household) Yes No
If owner knows of any leaks, backups or other material problems with the water supply system or quality or quantity of the water since owning the property (but not longer than the past 5 years), please describe and indicate any repairs completed: _____

Owner's Initials JH Date 8/27/09 Purchaser's Initials _____ Date _____

Property Address 237 Second St. SW New Phila

B) SEWER SYSTEM: The nature of the sanitary sewer system servicing the property is (check appropriate boxes):

- Public Sewer
- Private Sewer
- Leach Field
- Aeration Tank
- Unknown
- Other
- Septic Tank
- Filtration Bed

If not a public or private sewer, date of last inspection: _____
Do you know of any current leaks, backups or other material problems with the sewer system servicing the property? Yes No
If "Yes", please describe: _____

If owner knows of any leaks, backups or other material problems with the sewer system since owning the property (but not longer than the past 5 years), please describe and indicate any repairs completed: _____

Information on the operation and maintenance of the type of sewage system serving the property is available from the department of health or the board of health of the health district in which the property is located.

C) ROOF: Do you know of any current leaks or other material problems with the roof or rain gutters? Yes No
If "Yes", please describe: _____

If owner knows of any leaks or other material problems with the roof or rain gutters since owning the property (but not longer than the past 5 years), please describe and indicate any repairs completed: _____

D) WATER INTRUSION: Do you know of any previous or current water leakage, water accumulation, excess moisture or other defects to the property, including but not limited to any area below grade, basement or crawl space? Yes No
If "Yes", please describe and indicate any repairs completed: _____

Do you know of any water or moisture related damage to floors, walls or ceilings as a result of flooding; moisture seepage; moisture condensation; ice damming; sewer overflow/backup; or leaking pipes, plumbing fixtures, or appliances? Yes No
If "Yes", please describe and indicate any repairs completed: WALLS in Basement - No DE HUMIDIFIER USED LATELY!

Purchaser is advised that every home contains mold. Some people are more sensitive to mold than others. If concerned about this issue, purchaser is encouraged to have a mold inspection done by a qualified inspector. Have you ever had the property inspected for mold by a qualified inspector?
 Yes No If "Yes", please describe and indicate whether you have an inspection report and any remediation undertaken: _____

E) STRUCTURAL COMPONENTS (FOUNDATION, BASEMENT/CRAWL SPACE, FLOORS, INTERIOR AND EXTERIOR WALLS):

Do you know of any movement, shifting, deterioration, material cracks/settling (other than visible minor cracks or blemishes) or other material problems with the foundation, basement/crawl space, floors, or interior/exterior walls?
 Yes No If "Yes", please describe: _____

If owner knows of any repairs, alterations or modifications to control the cause or effect of any problem identified above, since owning the property (but not longer than the past 5 years), please describe: _____

Do you know of any previous or current fire or smoke damage to the property? Yes No
If "Yes", please describe and indicate any repairs completed: _____

F) MECHANICAL SYSTEMS: Do you know of any current problems or defects with the following mechanical systems? If your property does not have the mechanical system, mark N/A (Not Applicable).

	YES	NO	N/A		YES	NO	N/A
1) Electrical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8) Water softener	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2) Plumbing (pipes)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Is water softener leased?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3) Central heating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9) Security System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4) Central Air conditioning	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Is security system leased?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Sump pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10) Central vacuum	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
6) Fireplace/chimney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11) Built in appliances	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7) Lawn sprinkler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12) Other mechanical systems	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If the answer to any of the above questions is "Yes", please describe and indicate any repairs to the mechanical system since owning the property (but not longer than the past 5 years). _____

Owner's Initials JR Date 8 27-09 Purchaser's Initials _____ Date _____

Property Address 237 Second St SW New Phila

G) **WOOD BORING INSECTS/TERMITES:** Do you know of the presence of any wood boring insects/termites in or on the property or any existing damage to the property caused by wood boring insects/termites? Yes No
If "Yes", please describe: _____

If owner knows of any inspection or treatment for wood boring insects/termites, since owning the property (but not longer than the past 5 years), please describe: _____

H) **PRESENCE OF HAZARDOUS MATERIALS:** Do you know of the previous or current presence of any of the below identified hazardous materials on the property?

	Yes	No	Unknown
1) Lead-Based Paint	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2) Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3) Urea-Formaldehyde Foam Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4) Radon Gas	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. if "Yes", indicate level of gas if known _____			
5) Other toxic or hazardous substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If the answer to any of the above questions is "Yes", please describe and indicate any repairs, remediation or mitigation to the property: _____

I) **FLOOD PLAIN/LAKE ERIE COASTAL EROSION AREA:**

	Yes	No	Unknown
Is the property located in a designated flood plain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is the property or any portion of the property included in a Lake Erie Coastal Erosion Area?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

J) **DRAINAGE/EROSION:** Do you know of any current flooding, drainage, settling or grading or erosion problems affecting the property? Yes No

If "Yes", please describe: _____

If owner knows of any repairs, modifications or alterations to the property or other attempts to control any flooding, drainage, settling, grading or erosion problems since owning the property (but not longer than the past 5 years), please describe: _____

K) **ZONING/CODE VIOLATIONS/ASSESSMENTS/HOME OWNERS ASSOCIATION:** Do you know of any violations of building or housing codes, zoning ordinances affecting the property or any nonconforming uses of the property? Yes No
If "Yes", please describe: _____

Is the structure on the property designated by any governmental authority as a historic building or as being located in an historic district? (NOTE: such designation may limit changes or improvements that may be made to the property). Yes No

If "Yes", please describe: _____

Do you know of any recent or proposed assessments, which could affect the property? Yes No

If "Yes", please describe: _____

Is the property subject to any rules or regulations of, or the payment of any fees or charges to, a Homeowners Association, Condominium Association or any other Community Association? Yes No

If "Yes", please describe: _____

Owner's Initials JA Date 5/27/09 Purchaser's Initials _____ Date _____

Property Address 237 Jewel St. SW New Phila

L) BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any of the following conditions affecting the property? Yes No Yes No
1) Boundary Agreement 4) Shared Driveway
2) Boundary Dispute 5) Party Walls
3) Recent Boundary Change 6) Encroachments From or on Adjacent Property
If the answer to any of the above questions is "Yes", please describe:

M) UNDERGROUND STORAGE TANKS/WELLS: Do you know of any underground storage tanks (existing or removed), oil or natural gas wells (plugged or unplugged), or abandoned water wells on the property? Yes No
If "Yes", please describe:

N) OTHER KNOWN MATERIAL DEFECTS: The following are other known material defects in or on the property:

For purposes of this section, material defects would include any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property.

Owner represents that the statements contained in this form are made in good faith based on his/her actual knowledge as of the date signed by the Owner. Owner is advised that the information contained in this disclosure form does not limit the obligation of the owner to disclose an item of information that is required by any other statute or law or that may exist to preclude fraud, either by misrepresentation, concealment or nondisclosure in a transaction involving the transfer of residential real estate.

OWNER: James S. Hill DATE: 8/27/09
OWNER: _____ DATE: _____

RECEIPT AND ACKNOWLEDGEMENT OF POTENTIAL PURCHASERS

Potential purchasers are advised that the owner has no obligation to update this form but may do so according to Revised Code Section 5302.30(G). Pursuant to Ohio Revised Code Section 5302.30(K), if this form is not provided to you prior to the time you enter into a purchase contract for the property, you may rescind the purchase contract by delivering a signed and dated document of rescission to Owner or Owner's agent, provided the document of rescission is delivered prior to all three of the following dates: 1) the date of closing; 2) 30 days after the Owner accepted your offer; and 3) within 3 business days following your receipt or your agent's receipt of this form or an amendment of this form.

I/WE ACKNOWLEDGE RECEIPT OF A COPY OF THIS DISCLOSURE FORM AND UNDERSTAND THAT THE STATEMENTS ARE MADE BASED ON THE OWNERS ACTUAL KNOWLEDGE AS OF THE DATE SIGNED BY THE OWNER.

Owner makes no representations with respect to any offsite conditions. Purchaser should exercise whatever due diligence purchaser deems necessary with respect to offsite issues that may affect purchaser's decision to purchase the property. Purchaser should exercise whatever due diligence purchaser deems necessary with respect to Ohio's Sex Offender Registration and Notification Law (commonly referred to as "Megan's Law"). This law requires the local Sheriff to provide written notice to neighbors if a sex offender resides or intends to reside in the area. The notice provided by the Sheriff is a public record and is open to inspection under Ohio's Public Records Law. If concerned about this issue, purchaser assumes responsibility to obtain information from the Sheriff's office regarding the notices they have provided pursuant to Megan's Law.

My/Our Signature below does not constitute approval of any disclosed condition as represented herein by the owner.

PURCHASER: _____ DATE: _____
PURCHASER: _____ DATE: _____

Auction Conducted By:
Don R. Wallick Auctions, Inc.
Auctioneers: Don R. Wallick
Brennan R. Wallick
Ryan W. Wallick

Don R. Wallick Auctions, Inc.

965 N. Wooster Avenue
Strasburg, Ohio 44680
info@WallickAuctions.com
<http://www.WallickAuctions.com>



Toll Free: 1-866-348-9446 - Tel: 330-878-0075 - Fax: 330-878-7318