THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS, AND INSERTION OF SPECIAL CLAUSES, MAY CONSTITUTE THE PRACTICE OF LAW WHICH SHOULD ONLY BE DONE BY A LAWYER. MAIL TAX BILLS TO: HWEST INDIANA TITLE SERVICES. 6201 Kentucky P1. JITCLAIM DEED Merrillville IN 46410 CYNTHIA STRIEGEL THIS INDENTURE WITNESSETH, that GRANTOR(S) of County in the State of LAKE INDIANA QUITCLAIM(S) to WILLIAM D. STRIEGEL GRANTEE(S) of County in the State of LAKE 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: The South 30 feet of lot 12 and the North 60 feet of lot 13, Block 1, E.M. Rognes' First Addition to Glenellyn as shown in Plat Book 27 page 50 in Lake County, Indiana OFFICIAL commonly known as 620 Theorile by Placenties rither 1110 pre145410 f the Lake County Recorder! Key no.15-201-13 This quit claim deed will serve as certification that all equity interest in this property is totally satisfied, and there is no additional monies due. Dated this AUTH day of August DULY ENTERED FOR TAXATION SUBJECT TO (Signature) FINAL ACCEPTANCE FOR TRANSFER. (Signature) (Printed Name) (Signature) (Signature) SAM ORLICH (Printed Name) rinted Name) AUDITOR LAKE COUNT STATE OF INDIANA S COUNTY OF\_ SS: Before me, the undersigned, a Notary Public in and for said County and State, this 20th day of August personally appeared: Cynthia Striegel and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal. My commission expires: \_ Signature \_ Resident of County Printed \_\_\_\_ STATE OF **COUNTY OF** Before me, the undersigned, a Notary Public in and for said County and State, this\_\_\_ \_\_day of\_\_ personally appeared:

and acknowledged the execution

of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My commission expires: Signature

This instrument prepared by Richard a. Zunica Attorney Identification No. OOOASC

MAIL TO: