

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:
508 Siebert Drive
Schererville, IN. 46375

QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that EILEEN SONGER

GRANTOR(S) of LAKE County in the State of INDIANA

QUITCLAIM(S) to ANNA R. WILEY

GRANTEE(S) 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:

95057849

LOT 55 IN COUNTRY HILLS ESTATES, UNIT 2, IN THE TOWN OF SCHERERVILLE, AS PER PLAT THEREOF, RECORDED MARCH 14, 1989 IN PLAT BOOK 65 PAGE 58, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Commonly known as: 508 Siebert Drive Schererville, IN 46375

GRANTOR CERTIFIES THAT THIS IS AN EXEMPT TRANSACTION AND NO SALES DISCLOSURE STATEMENT IS REQUIRED.

Key No. 13-461-5

Dated this 16 day of Sept, 1995

Eileen Songer
(Signature)
EILEEN SONGER
(Printed Name)

SEP 25 1995
SAM ORLICH
AUDITOR LAKE COUNTY

(Signature)
(Printed Name)

(Signature)
(Printed Name)

STATE OF INDIANA Montgomery
COUNTY OF LAKE SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 16 day of September, 1995, personally appeared: EILEEN SONGER

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: 5-22-98 Signature *Diana L. Barnhart*
Resident of Montgomery County, Printed DIANA L. BARNHART, Notary Public
INDIANA

STATE OF _____
COUNTY OF _____ SS:

Before me, the undersigned, a Notary Public in and for said County and State, this _____ day of _____, 199____, 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 _____
Resident of _____ County Printed _____, Notary Public

This instrument prepared by Patrick J. McManama 5265 Commerce Dr., Suite E Crown Point, IN 46307 Attorney at Law
Attorney Identification No. ID# 9534-45

MAIL TO:

001540

COMMUNITY TITLE COMPANY
FILE NO. 2/15/95

STATE OF INDIANA
LAKE COUNTY
RECORDER
95 SEP 26 AM 9:21

