MAIL TAX BILLS TO:

5610 JOHNSON ST. MERRILLVILLE, IN 46410

QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that

MAX W. ACKERMAN

GRANTOR(S) of

LAKE

County in the State of

INDIANA

QUITCLAIM(S) to

MAX W. ACKERMAN AND DONNA L. ACKERMAN, HUSBAND AND WIFE

GRANTEE(S) of

Attorney Identification No. .

MAIL TO:

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:

County in the State of

LOT 40 IN BLOCK 14 IN MEADOWDALE SUBDIVISION, IN THE TOWN OF MERRILLVE AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 31 PAGE 52, IN THE OFFICE OF RECORDER OF LAKE COUNTY, INDIANA I I I IS 15-277-40% COMMONLY KNOWN AS 15610 JOHNSON ST : MERRILLVILLE, IN 46410 the Lake County Recorder! _day of (Signature) (Signature) DULY ENTERED FOR TAXATION SUIDIECT TO (Printed Name) (Printed Name) FINAL ACCEPTANCE FOR TRANSFER. (Signature) 110V 9 (Printed Name) (Printed Name) SAM ORLICH STATE OF INDIANA COUNTY OF____LAKE .SS: Before me, the undersigned, a Notary Public in and for said County and State, this 2ND day of NOV personally appeared: personally appeared: MAX W. ACKERMAN 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: ____06-07-96_ Signature. THOMAS G. SCHILLER ____ County Printed _ Resident of _ 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. Signature _ My commission expires: _ , Notary Public _ County Printed Resident of This instrument prepared by ROBERT B. LEOPOLD; 8242 CALUMET AVE.; MUNSTER, IN 219/922-9661

Attorney Identification No. Attorney at Lav

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