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: 6929 Broadway; Merrillville, IN 46410

QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that

KELLY R. BUNNELL, an adult

GRANTOR(S) of	Lake	County in the	e State of	Indiana	
QUITCLAIM(S) to JEFF	REY BUNNELL	and KELLY	R. BUNNELL	, as tenant	s in
GRANTEE(S) of	Lake	County in th	e State of	Indiana	
	roma i Moga i baja si i				
in consideration of One Dolla the following described real of		valuable consideratio ike		ufficiency of which State of Indiana:	are hereby acknowledged,
Part of the Township 35 in Lake Coun a point 380. Section 15; West 330 fee except the I	North, Rangaty, Indiana 48 feet Southence East thence East et; thence 1 East 30 feet	ge 8 West of a, described the 1 330 feet; worth 60 feet thereof.	the 2nd P as follow Northwest c thence Sou telettes AXAMION SUBJECT T	rincipal Me s: Beginni orner of sa th 60 feet; lace of beg	ridian, ng at id thence
	1 IIIS D	Lake Coun NOV 2		The second secon	
Dated this 9th day	November	SAM O AUDITOR LA , 199	Control of the Contro		9507
some kin	John -				
Kerryc'R. Bunnel		TOWN BE	(Signature)		မ္
(Printed Name)	1.50		(Printed Name)		
(Signature)			(Signature)		
(Printed Name)		EARLY, NOIA	(Printed Name)		
STATE OF INDIANA COUNTY OF Lake	SS SS	A COMMITTEE OF THE PROPERTY OF			WAR:
Before me, the undersigned personally appeared: Kelly R. Bu		and for said County	and State, this		November 5
of the foregoing deed. In w	tness whereof, I ha	ve hereunto subscrib	ed my name and a		
My commission expires:	8-5-97		Signature	ser	40 6 FS
		ounty Printed	David E. Wo	oodward	Notary Ryb
STATE OF		S:		***	
Before me, the undersigned personally appeared:	ว สาร์ ความหรือว่า เมื่อรัฐการไปเรื่		and State, this	day of	, 199
of the foregoing deed. In wi	itness whereof. I ha	ve hereunto subscrib	ed my name and a		acknowledged the executional.
My commission expires:			Signature		
IVIY COMBINISSION CXDITES:			Digitatuic		

MAIL TO:

Resident of _

This instrument prepared by David E.

Attorney Identification No. 15299-45

Attorney Identification No. .

PRINTED BY THE ALLEN COUNTY INDIANA BAR ASSOCIATIO

001064

_, Notary Public

Woodward, 300 E. 90th Drive, Merrillvill Amorney at Law

Indiana, 46410

_ County Printed _