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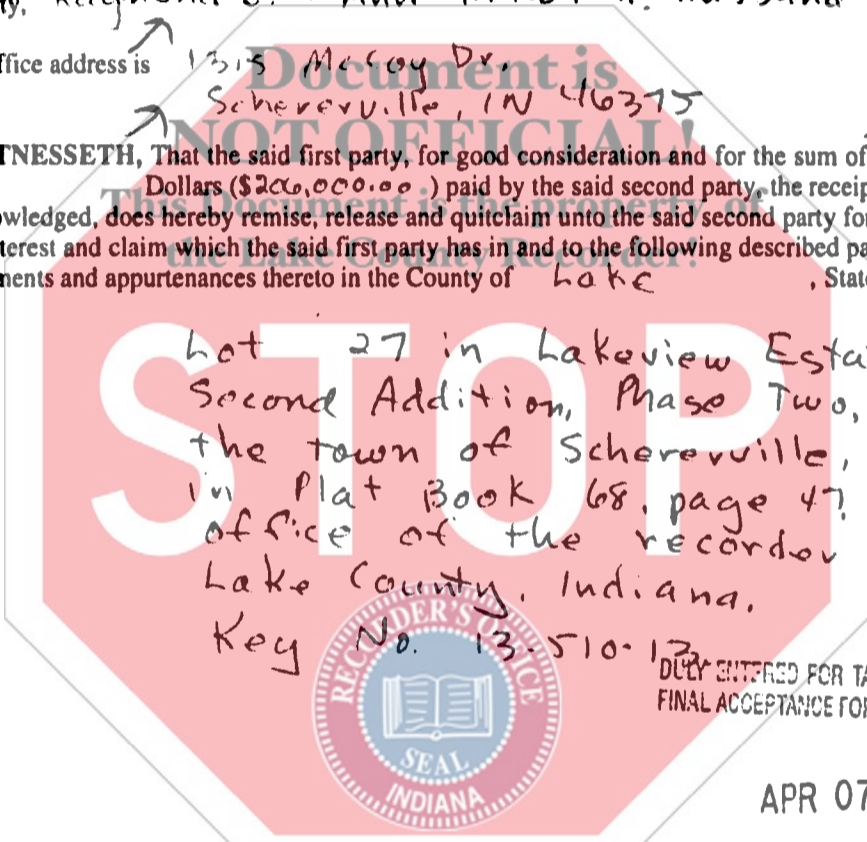
RECORDER

Form R298

# QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 7th day of April, 1997,  
 by first party, John B. Noldin  
 whose post office address is 920 W. Ave. "H", Griffith IN 46319  
 to second party, Raymond J. & Anne H. Noldin, husband and wife,  
 whose post office address is 1515 McCoy Dr., Schererville, IN 46375

WITNESSETH, That the said first party, for good consideration and for the sum of Two Hundred Six Thousand  
Dollars (\$206,000.00) paid by the said second party, the receipt whereof is  
 hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the  
 right, title, interest and claim which the said first party has in and to the following described parcel of land,  
 and improvements and appurtenances thereto in the County of Lake, State of Indiana  
 to wit:



Lot 27 in Lakeview Estates  
Second Addition, Phase Two, to  
the town of Schererville, recorded  
in Plat Book 68, page 47, in the  
office of the recorder of  
Lake County, Indiana.  
Key No. 13-510-12

DUTY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER.

APR 07 1997

IN WITNESS WHEREOF, The said first party has signed and sealed on this 7th day  
 and year first above written. **SAM ORLICH**  
**AUDITOR LAKE COUNTY**

Signed, sealed and delivered in presence of:

Witness \_\_\_\_\_  
 First Party [Signature]  
 Witness \_\_\_\_\_  
 Second Party \_\_\_\_\_

State of \_\_\_\_\_ }  
 County of \_\_\_\_\_ }

On \_\_\_\_\_ before me,  
 appeared \_\_\_\_\_  
 personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s)  
 is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in  
 his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the  
 entity upon behalf of which the person(s) acted, executed the instrument.  
 WITNESS my hand and official seal.

Signature [Signature]  
**SHIRLONDA I DOWD**  
**NOTARY PUBLIC STATE OF INDIANA**  
**LAKE COUNTY**  
**MY COMMISSION EXP MAY 5, 2000**

000008  
 Affiant \_\_\_\_\_ Known \_\_\_\_\_ Produced ID \_\_\_\_\_  
 Type of ID \_\_\_\_\_ (Seal)

10.00  
su  
CS