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MAIL TAX BILLS TO:  
1625 Georgia Street  
Gary, Indiana 46407

# QUITCLAIM DEED

97022510

THIS INDENTURE WITNESSETH, that Ernestine L. Larson

GRANTOR(S) of Lake County in the State of Indiana

Joint Tenants

QUITCLAIM(S) to Ernestine L. Larson and Lucinda Kuykendall, with rights of survivorship.

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:

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
37 APR 14 PM 12:15  
NORTH W. CARTER  
RECORDER

Lot 20, Block 6, Davis and Holmes First  
Subdivision, in the City of Gary, as  
shown in Plat Book 11, page 4, in Lake  
County, Indiana. Commonly known as  
1625 Georgia Street, Gary, Indiana 46407  
Key# 42-180-20

This Document is to be  
the Lake County Recorder!

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER.

APR 14 1997

FOR NO CONSIDERATION

SAM ORLICH  
AUDITOR LAKE COUNTY

Dated this 25th day of March, 1997.

*Ernestine L. Larson*  
(Signature) Ernestine L. Larson

(Printed Name)

(Signature)

(Printed Name)

(Signature)

(Printed Name)

(Signature)

(Printed Name)

STATE OF INDIANA  
COUNTY OF LAKE SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 25th day of March, 1997, personally appeared:

Ernestine L. Larson

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: July 28, 2000

Signature *Diane Cobb*

Resident of Lake County Printed Diane Cobb, Notary Public

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 Robert L. Lewis 2148 West 11th Ave. Gary, IN 46404 Attorney at Law  
Attorney Identification No. 10070-45

000773

MAIL TO:

1100  
OK  
CS