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MORRIS W. CARTER
RECORDER

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 1st day of October, 1997

by first party, Grantor, JOHNNY WILLIAMS

whose post office address is 859 Fayette St.
Gary, IN

to second party, Grantee, CLEOPATRA FRANKLIN

whose post office address is 4423 Washington St.
Gary, IN 46408

WITNESSETH, That the said first party, for good consideration and for the sum of TEN - - - - - n0/100 Dollars (\$ 10.00) 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 there- to in the County of LAKE, State of INDIANA to wit:

Lots numbered Thirty-two (32) and Thirty-three (33), in Block Two (2), as marked and laid down on the recorded plat of South Broadway Land Company's Fifth (5th) South Broadway Addition to Gary, in the City of Gary, Lake County, Indiana, as per plat thereof in Plat Book 9, Page 2, in Lake County, Indiana.

Better known as: 3884 Washington St.
Gary, IN 46408
Key Number: 47-81-32 and 33

AFHE
(1)

(Revised 3/97)

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

ENTERED FOR TAXATION SUBJECT
TO LOCAL ACCEPTANCE FOR TRANSFER.

OCT 01 1997

SAM ORLICH
AUDITOR LAKE COUNTY



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IT¹ WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Joseph D. Moke
Signature of Witness

JOSEPH D. MOKE
Print name of Witness

Signature of Witness

Print name of Witness

x Johnny Williams
Signature of First Party

JOHNNY WILLIAMS
Print name of First Party

Signature of First Party

Print name of First Party

State of Indiana)

County of Lake

On October 1, before me, JOHNNY WILLIAMS,
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.

Willie D. Vent
Signature of Notary
My Commission expires 2-14-2000

Affiant Known Produced ID
Type of ID _____
(Seal)

State of Indiana)

County of Lake

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 of Notary

Affiant Known Produced ID
Type of ID _____
(Seal)

x _____
Signature of Preparer

JOHNNY WILLIAMS
Print Name of Preparer

Address of Preparer

(2)

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.