

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: Kathryn A. Branch, 9243 Grace Place, Highland, Indiana 46322

QUITCLAIM DEED



97089367

THIS INDENTURE WITNESSETH, that

Robert D. Branch
GRANTOR(S) of Lake County in the State of Indiana

QUITCLAIM(S) to
Kathryn A. Branch
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:

Lot 54 in Southtown Estates, 1st Addition to the Town of Highland, Indiana as shown in Plat Book 32, Page 61 in the Office of the Recorder of Lake County, Indiana.

More Commonly Known as: 9243 Grace Place, Highland, Indiana 46322

STATE OF INDIANA
LAKE COUNTY
RECORDER
97089367
MAY 11 11:11 AM '97

JULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER.

DEC 30 1997

SAM ORLICH
AUDITOR LAKE COUNTY

Dated this 15 day of December, 1997

Robert D. Branch

(Signature)

Robert D. Branch

(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 15th day of December, 1997, 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: 3/21/99 Signature *Janet R. Elias*

Resident of Lake County Printed JANET R. ELIAS, 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 Jill S. Swope, 425 W. Lincoln Highway, Schererville, IN 46375 Attorney at Law
Attorney Identification No. 18879-64

MAIL TO: Kathryn A. Branch, 9243 Grace Place, Highland, Indiana 46322

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