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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

99029344

99 APR -7 AM 8:55

MORRIS W. CARTER
RECORDER

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 1 day of April, 1999 (year),
 by first party, Grantor, Anna F. Travis
 whose post office address is 6335 Nebraska Avenue
Hammond, Indiana 46323
 to second party, Grantee, Dieke B. Lee and Allan S. Lee
 whose post office address is 7227 Schneider Av.
Hammond, Indiana 46323

WITNESSETH, That the said first party, for good consideration and for the sum of
 Dollars (\$) 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:

5435 W. 35th Avenue / Gary, Indiana 46405
Lot 26 and the East Half of Lot 25
Burr Acres, as shown in Plat Book 24,
Page 2, in Lake County, Indiana
Key 49-121-26+35

AKHF
 DULY ENTERED FOR REGISTRATION SUBJECT TO
 FINAL ACCEPTANCE FOR TRANSFER
 If your state requires 8 1/2" x 11" forms, cut on this page at the dotted line. (Revised 3/98)

APR 07 1999

PETER BENJAMIN
LAKE COUNTY AUDITOR

000484



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12/10/99

IN 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:

[Signature]
Signature of Witness

[Signature]
Signature of First Party

[Signature]
Print name of Witness

Anna F. Travis
Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

State of INDIANA
County of LAKE

On 7-APRIL-1999 before me, Lonnie P Carter
appeared ANNA F. TRAVIS

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.

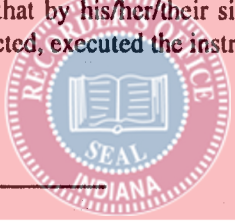
Lonnie P. Carter
Notary Public, State of Indiana
Lake County
My Commission Exp: 04/01/2001

[Signature]
Signature of Notary

Affiant _____ Known Produced ID _____
Type of ID DENEK'S (Seal)

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 of Notary

Affiant _____ Known _____ Produced ID _____
Type of ID _____ (Seal)

Signature of Preparer

Print Name of Preparer

Address of Preparer

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