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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

99 AUG 10 PM 3:52

MORRIS W. CARTER
RECORDER

A298-10
R298-04

QUITCLAIM DEED

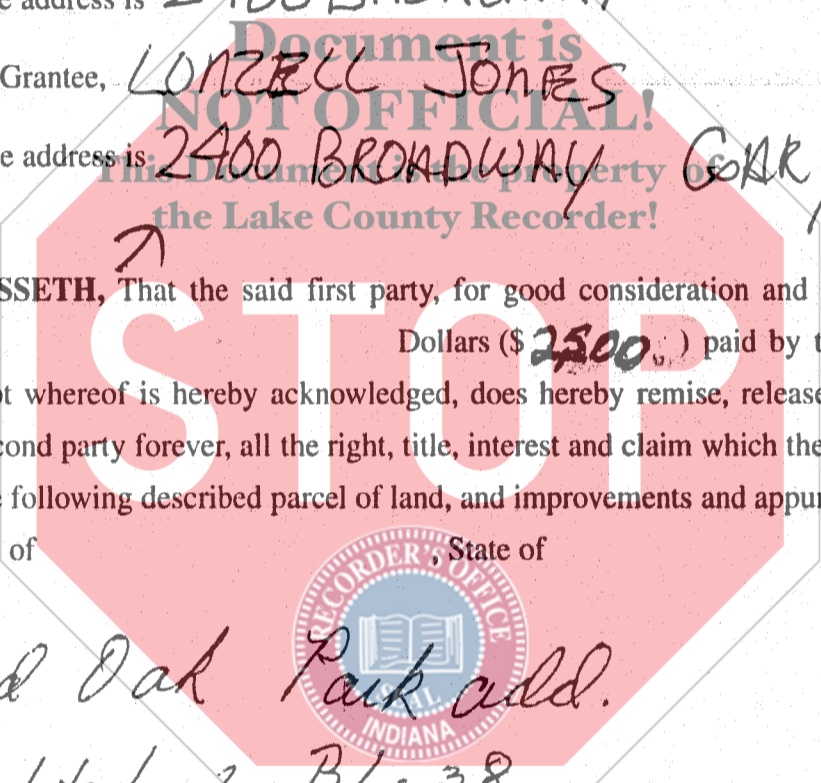
THIS QUITCLAIM DEED, Executed this day of MAY 20, 1999 (year),

by first party, Grantor, EARVIN WILLIE MORE

whose post office address is 2400 BROADWAY

to second party, Grantee, LONZELL JONES

whose post office address is 2400 BROADWAY GARY 46407



WITNESSETH, That the said first party, for good consideration and for the sum of Dollars (\$ 2500) 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 , State of to wit:

2nd Oak Park add.
L. 1 + L. 2 Bl. 38
Key no. 25-46-0196-1

ZAHF
(1)

Rev. 6/98

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

**DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER.**

AUG 10 1999

00227

**PETER BENJAMIN
LAKE COUNTY AUDITOR**



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1700
SW
CS

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:

Stephanie Thomas
Signature of Witness

STEPHANIE THOMAS
Print name of Witness

Allen Jones
Signature of Witness

ALLEN JONES
Print name of Witness

Earvin Willie More
Signature of First Party

EARVIN WILLIE MORE
Print name of First Party

Lonzell Jones
Signature of First Party

LONZELL JONES
Print name of First 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.

Darrellyn D. Wilson
Signature of Notary

Affiant _____ Known _____
Type of ID _____

State of _____
County of _____
On _____
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.

Darrellyn D. Wilson
Signature of Notary

Affiant _____ Known _____ Produced ID _____
Type of ID _____

Darrellyn D. Wilson (Seal)
Signature of Preparer

DARREILYN D. WILSON
Print Name of Preparer

1900 GEORGIA ST.
Address of Preparer