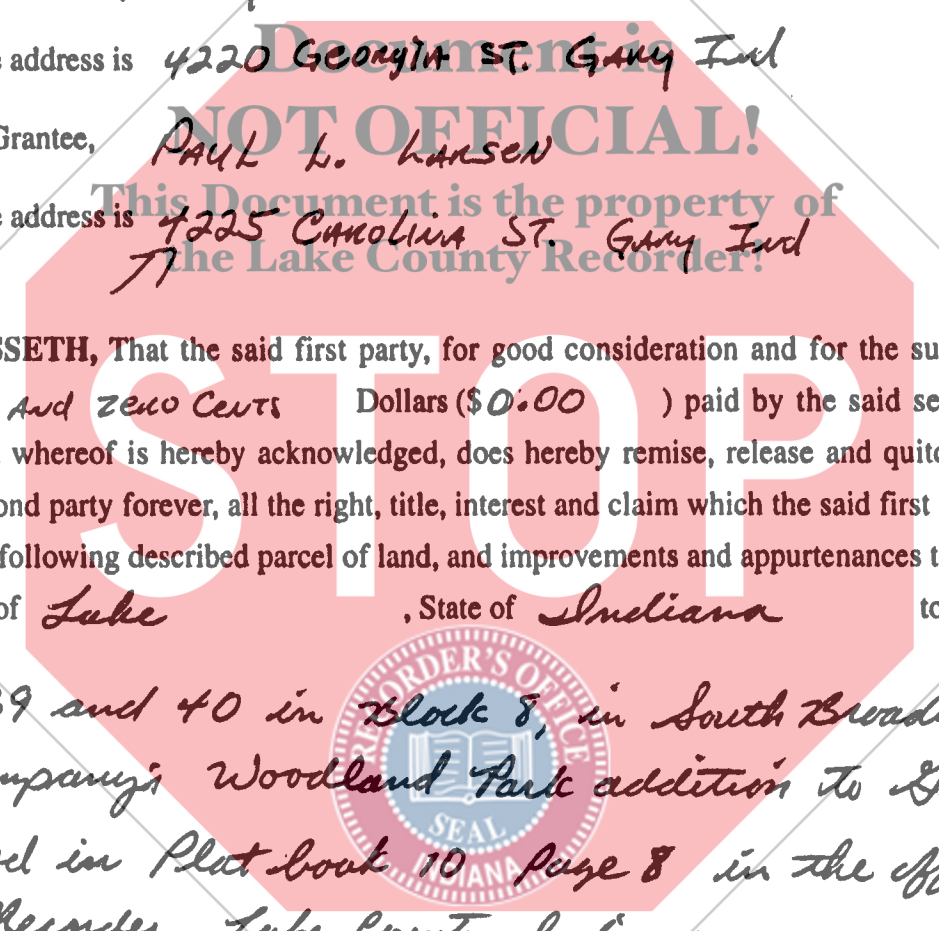99071406

QUITCLAIM DEED

A298-10
R298-04

THIS QUITCLAIM DEED, Executed this 27th day of august , (year), 1999

by first party, Grantor, Newry O. Sheets - Jr

whose post office address is 4220 Georgia St. Gary Ind

to second party, Grantee, Paul L. Larsen

whose post office address is 4225 Carolina St. Gary Ind

WITNESSETH, That the said first party, for good consideration and for the sum of
Zero dollars And zero Cents Dollars ($ 0.00) 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 39 and 40 in Block 8 in South Broadways
Land Company's Woodland Park addition to Gary
Recorded in Plat book 10 Page 8 in the office
of the Recorder, Lake County Indiana

Key# 47-331-35

AKHF
(1)   (Revised 3/98)

If your state requires 8 ½" x 11" forms, cut off the bottom of this page at the dotted line.

00336

12.00
E.P.
CS

0 53926 20040 5

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:

Geraldine Stamps
Signature of Witness

Geraldine Stamps
Print name of Witness

Henry O. Sheets
Signature of First Party

Henry O. Sheets-Jr
Print name of First Party

_____
Signature of Witness

_____
Print name of Witness

_____
Signature of First Party

_____
Print name of First Party

State of _Indiana_)
County of _Lake_
On _August 27 1999_ before me, _Henry O. Sheets Jr._
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.

Shurlonda L. Dowd
Signature of Notary

Affiant _____ Known _____ Produced ID
Type of ID _____
(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

---------------------------------(2)---------------------------------
If your state requires 8 ½" x 11" forms, cut off the bottom of this page at the dotted line.