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99083949

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

99 OCT 12 AM 10: 04

MORRIS W. CARTER RECORDER

A298-10 R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 207day of SEPTEMBER, (year), 99

by first party, Grantor, William CARL Emory

whose post office address is 2200 12. Sal 20 Rd. Philadelphia Pa. 19131

to second party, Grantee, Deessa Simpson

whose post office address is 2185 Taney St. Gary 2. 46404

whose post office address is 2185 Taney St. Gary 2. 46404

The Lake County Recorder!

> WOODED HIGHLANDS ADD. L 16 BL. 2 AND N 1/2 VAC. 22ND AVE ADJ.

> > AEHH (1)

Rev. 4/99

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

LU FOR I MATION LEPTANCE FOR TRANSFE.

OCT 12 1999

PLICE BENJAMIN

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written. Signed, sealed and delivered in presence of: Signature of First Party

Lilliam C. Emons
Print name of First Party MATTHEW J. MCGETTIGAW Print name of Witness Signature of First Party Print name of Witness Print name of First Party State of PA County of MONTSO MERY

On SEPT 20 TH 1999 before me, MATHEW J. MCGETT 6AN

appeared WILLIAM C. EMORY

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. Lower Merion Twp., Montgomery County My Commission Expires August 25, 2003 Affiant Produced ID Signature of Notary Type of ID (Seal) State of County of before me, 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. _Known____Produced ID Signature of Notary Type of ID (Seal) Signature of Preparer Print Name of Preparer Address of Preparer If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above

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