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STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

99 OCT 20 AM 10: 20

MORRIS W. CARTER RECORDER

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 19 day of October , 1999 (year),

by first party, Grantor,

Gerald A. Kruse & Wanda Kruse

whose post office address is

3328-176th ST CIT IS

to second party, Grantee,

whose post office address is 3328-176th ST. Recorder!

Hammond,

WITNESSETH, That the said first party, for good consideration and for the sum of ******* FIVE *** Dollars (\$ 5.00 ***) 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-State of Indiana to in the County of Lake to wit:

Lot 20 in Block 4 in the Resubdivision of Sunshine Addition to Hammond, Indiana, as per plat of said Resubdivision recorded in Plat Book 28 Page 31, in the Office of the Key# 36-479-20 Recorder of Lake County, Indiana.

AQHH (1)

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.

OCT 20 1944

PETER BENJAMIN LAKE COUNTY AUDITOR 12.00

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IN WITNESS WHEREOF, The said first party has signed written. Signed, sealed and delivered in presence of:	ed and sealed these presents the day and year first above
maria Double Harcia	Signature of First Party
Signature of Witness MAPIA ISABEL GARCIA Print name of Witness April V. Yaulouik	Print name of First Party Wanda Bruce Since Party
Signature of Witness APATE N. YANKOUTEH Print name of Witness	Signature of First Party Wanda Kruse Print name of First Party
State of Indiana) County of Lake On October 19,1999 before me, appeared Revald Attrace personally known to me (or proved to me on the basis of	•
is/are subscribed to the within instrument and acknowledge authorized capacity(ies), and that by his/her/their signatu behalf of which the person(s) acted, executed the instrume WITNESS my hand and official seal.	d to me that he/she/they executed the same in his/her/their re(s) on the instrument the person(s), or the entity upon ent.
Signature of Notary	Affiant Known Produced ID
State of Indiana County of Lake On October 19,1999 before me,	Type of ID <u>License</u> (Seal)
personally known to me (or proved to me on the basis of is/are subscribed to the within instrument and acknowledge authorized capacity(ies), and that by his/her/their signatus behalf of which the person(s) acted, executed the instrume WITNESS my hand and official seal.	d to me that he/she/they executed the same in his/her/their re(s) on the instrument the person(s), or the entity upon
Signature of Notary	AffiantKnownProduced ID
	Type of ID Licenso (Scal) Signature of Preparer
	Paula J. Kruse Print Name of Preparer 3328-176th St Hammond, IN 46323 Address of Preparer
If your state requires 8 1/a" y 11" forms, cut o	

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