

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

99089014

99 OCT 28 AM 10:13

MONNIS W. CARTER
RECORDER

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this ^{27th} ~~25~~ day of October, 1999 (year),

by first party, Grantor, DERRICK MARKS

whose post office address is 2832 W. 84th St Chicago, IL 60652

to second party, Grantee, Michelle Vaena Marks

whose post office address is 2832 W. 84th St Chicago, IL 60652

WITNESSETH, That the said first party, for good consideration and for the sum of Dollars (\$ 1.00) 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:

River view Land And Investments CO
Addition of Gary North 2 Parcel Lot 23
Block 2 all of Lot 24 Block 2 and south
19 feet Lot 25 Block 2 in the city
of Gary

Key # 46-462-24

DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER.

OCT 28 1999
AQHH (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.

PETER BENJAMIN
LAKE COUNTY AUDITOR

001935



12.00
2.P.
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:

Maureen Stamps
Signature of Witness

Derrick Marks
Signature of First Party

Maureen Stamps
Print name of Witness

DERRICK MARKS
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 Yape
On October 28, 1999 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.

Document is
NOT FOR RECORD
This Document is the property of
the Lake County Recorder!

SHIRLONDA L DOWD
NOTARY PUBLIC STATE OF INDIANA
LAKE COUNTY
MY COMMISSION EXP MAY 5, 2000

Shironda 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 1/2" x 11" forms, cut off the bottom of this page at the dotted line.