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25. In 12. 3. 27

A298-10 R298-04

QUITCLAIM DEED

| | THIS Q | UITCLA | AM DEEL |), Execute | d this 🗡 | day of | MARK | 11 ,20 | (year), |
|---------------|--|-----------|--------------|--------------|---------------|------------|--------------------------|------------|-------------|
| \rightarrow | by first party, Grantor, DA LENE JOR (HA - HEA 1)MA LEM SEA ONT | | | | | | | | |
| • | whose post office address is // Document is // 1415 41646 / | | | | | | | | |
| | whose post office address is it so contact the property of | | | | | | | | |
| | | | | | | | | | |
| | | | | | Count | ~ | | | |
| | WITNESSETH, That the said first party, for good consideration and for the sum of | | | | | | | | |
| | | | | | Dollars (S | \$ |) paid | by the sa | id second |
| | party, the receip | t whereo | f is hereby | acknowle | edged, doe | s hereby | r <mark>emise,</mark> re | elease and | quitclaim |
| | unto the said sec | ond party | y forever, a | ll the right | , title, inte | rest and c | claim which | the said | first party |
| | has in and to the | | | | | | | | |
| | to in the County | | | | | | N SINK | | to wit: |
| | THE RESERVE | | | | | | | | |
| | Addr 1516 VERMONT Gary IN 46407-1539 DAVIS & HOLMES 1ST SUBDIVISION | | | | | | | | |

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Rev. 4/99

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



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as of

Signature of Witness Print name of Witness Print name of First Party Signature of First Party Signature of Witness Print name of Witness Print name of First Party State of County of On 15- MARCH - 2000 before me, LONNIE -P CARTER personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) appeared DARIENE JORDAN 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 up behalf of which the person(s) acted, executed the instrument. Notary Public, State of Indiana WITNESS my hand and official seal. Lake County is the pro My Commission Exp. 04:01/2001 ounty Record (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 . Type of ID (Seal) Signature of Preparer Print Name of Preparer Address of Preparer

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:

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

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