

2

STATE OF INDIANA
LAKE COUNTY
FILED

2000 021949

2000 MAR 30 PM 3: 05

MCHESTER COUNTY
RECORDER

A298-10
R298-04

QUITCLAIM DEED

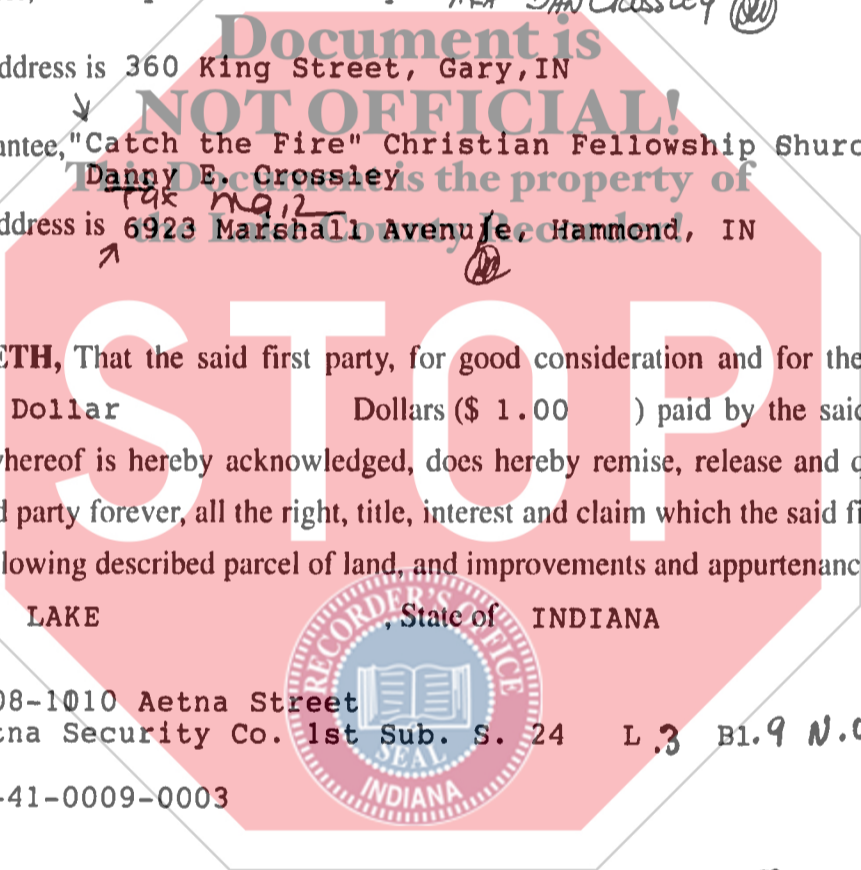
THIS QUITCLAIM DEED, Executed this 28 day of MARCH, 2000 (year),

by first party, Grantor, Danny E. Crossley AKA Dan Crossley

whose post office address is 360 King Street, Gary, IN

to second party, Grantee, "Catch the Fire" Christian Fellowship Church

whose post office address is 6923 Marshall Avenue, Hammond, IN



WITNESSETH, That the said first party, for good consideration and for the sum of One Dollar 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:

1008-1010 Aetna Street
Aetna Security Co. 1st Sub. S. 24 L. 3 B1.9 N.09ft L.4 B1.9
25-41-0009-0003

DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER.

MAR 30 2000

PETER BENJAMIN
LAKE COUNTY AUDITOR

12313

ZAHH (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.



16.00
1296

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:

Theresa Ruelas
Signature of Witness

Danny E. Crossley
Signature of First Party

Theresa Ruelas
Print name of Witness

Danny E. Crossley
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 Lake
On March 30, 2000 appeared

before me, _____ 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.

Shironda L. Dowd
Signature of Notary

Affiant _____ Known _____ Produced ID _____
Type of ID _____ (Seal)

State of _____)
County of _____
On _____ appeared

before me, _____ 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.