

STATE OF INDIANA
LAKE COUNTY
FILED

2000 024669

2000 APR 11 PM 12:41

RECORDER
RECORDED

A298-10
R298-04

QUITCLAIM DEED

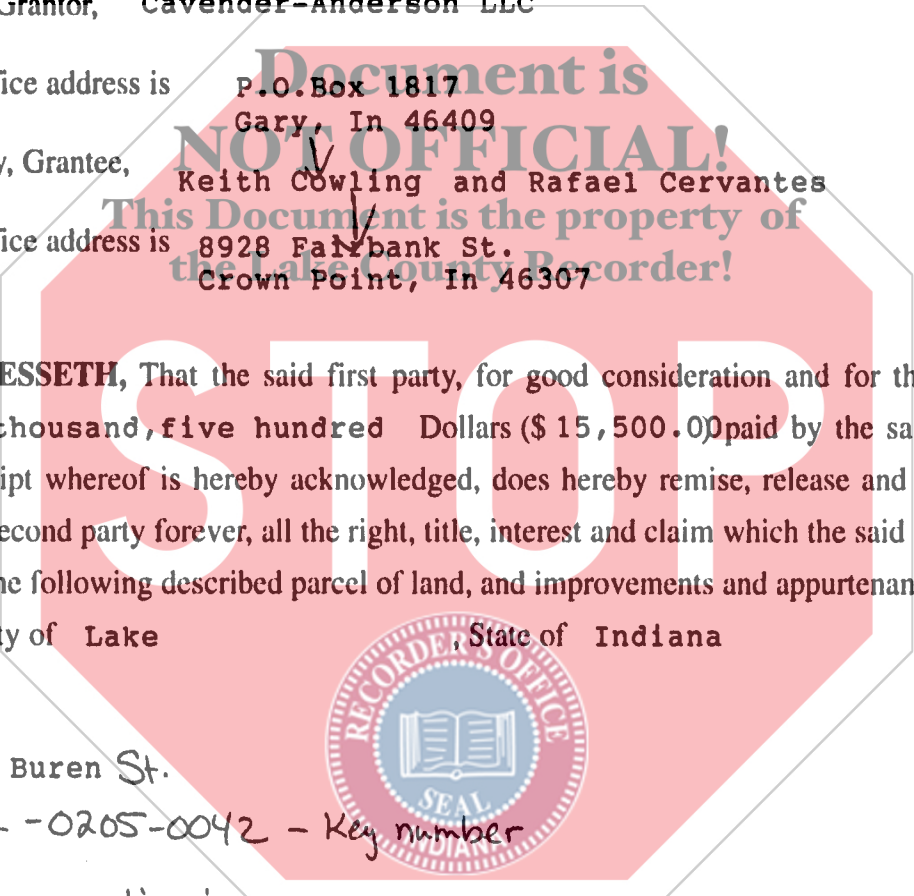
THIS QUITCLAIM DEED, Executed this 4th day of April, 2000 (year),

by first party, Grantor, Cavender-Anderson LLC

whose post office address is P.O. Box 1817
Gary, In 46409

to second party, Grantee, Keith Cowling and Rafael Cervantes

whose post office address is 8928 Fairbank St.
Crown Point, In 46307



WITNESSETH, That the said first party, for good consideration and for the sum of fifteen thousand, five hundred Dollars (\$15,500.00) 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:

2556 Van Buren St.

24-42-0205-0042 - Key number

Legal Description:

Douglas Park Add. N2L.85 BL. 2 ALL L.86 BL. 2

ZBHH (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.



DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER.

APR 11 2000

PETER BENJAMIN
LAKE COUNTY AUDITOR

00703 16-
dm

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:

Signature of Witness

Dan Cavender Member
Signature of First Party

Print name of Witness

DAN CAVENDER Cavender + Anderson L.L.C.
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 Lane

On APR 10 2000 before me, Dan Cavender
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.

John S Olsen
Signature of Notary

JOHN S OLSEN
NOTARY PUBLIC STATE OF INDIANA
LANE COUNTY
MY COMMISSION EXP. NOV. 16, 2001

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.