Key No. 14-19-103-22

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2000 028366

STATE OF INCHESTANCE FOR TRANSFER.

FILED FOR RECOMPT APR 26, 2000

2000 APR 26 PH 3: 57

MORRIS WHOMENEY ... L. TOA RECORDER

A298-10 R298-04

## **QUITCLAIM DEED**

THIS QUITCLAIM DEED, Executed this 16th 2000

day of February

by first party, Grantor,

Diana K. Chalabis

whose post office address is 4720 E. 25th Ave., Lake Station IN 46405

to second party, Grantee, John Chalabis Jr. FFICIAL!

whose post office address is 4720 E. 25th Ave., Lake Station IN 46405 the Lake County Recorder!

WITNESSETH, That the said first party, for good consideration and for the sum of Dollars (\$ 0.00 ) 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 thereto in the County of LAKE , State of INDIANA to wit:

4720 E. 25th Ave.
Lake Station, IN 46405
Elliot's Park
W.8.25' OF L.21 BL.C
ALL L.22 BL.C
E. 8.25 FT. OF L.23 BL.C

ZBHE

(1)

(Revised 3/97)

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16 cm

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John ChALAbis TR.

5605-5 OLD PORTER Rd PORTAGE JNd 46368 e no not

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: Diana K. Chalabis

Diana K. Chalabis

Print name of First Party Signature of Witness Print name of Witness Signature of Witness Signature of First Party Print name of Witness Print name of First Party State of INDIANA County of PORTER reb. 16, 2000 before me, Shelly Myers 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. Comm. Exp. - 10-1-2007 Shelly Myers 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. Produced ID Signature of Notary Type of ID (Seal) Signature of Preparer Print Name of Preparer Address of Preparer 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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