

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2000 034113

2000 MAY 17 PM 3:31

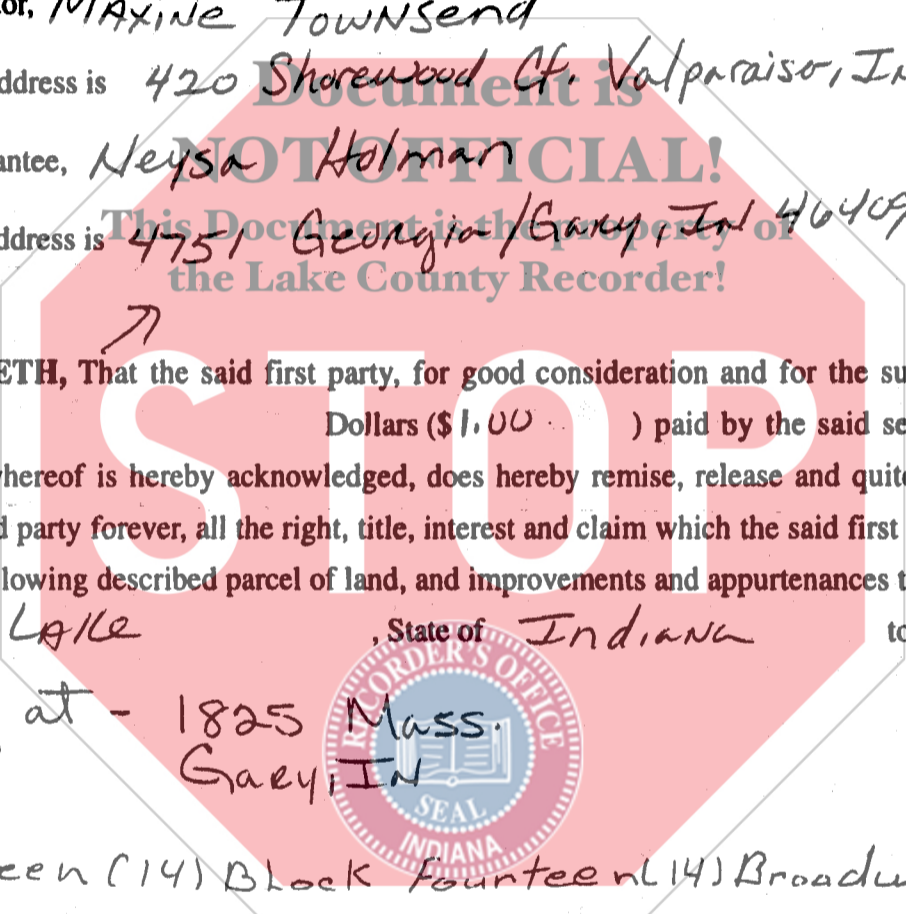
MORRIS W. CARTER
RECORDER

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this May 17th day of MAY, 192000,

by first party, Grantor, Maxine Townsend
whose post office address is 420 Shorewood Ct. Valparaiso, IN 46385
to second party, Grantee, Neysa Holman
whose post office address is 4751 Georgia/Gary, IN 46409



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:

Property at - 1825 Mass. Gary, IN
add

Lot Fourteen (14) Block Fourteen (14) Broadway Addition to Gary, Lake County, Indiana 17/K1A
1825 Massachusetts street, Street, Gary, INd

DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

41-0145-14

MAY 17 2000

PETER BENJAMIN
LAKE COUNTY AUDITOR

ATHE
(1)

(Revised 3/97)

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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16.00
E.P.
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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

John Townsend
Signature of First Party

Print name of Witness

Maxine Townsend
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 17-MAY-2000 before me, Lonnie P Carter
appeared MAXINE TOWNSEND

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.

Lonnie P Carter
Signature of Notary

Affiant Known Produced ID
Type of ID Dener's
(Seal)

State of _____
County of _____
On _____
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.