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STATE OF INDIANA  
LAKE COUNTY  
FILED

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

2000 044067

2000 JUN 22 PM 1:35

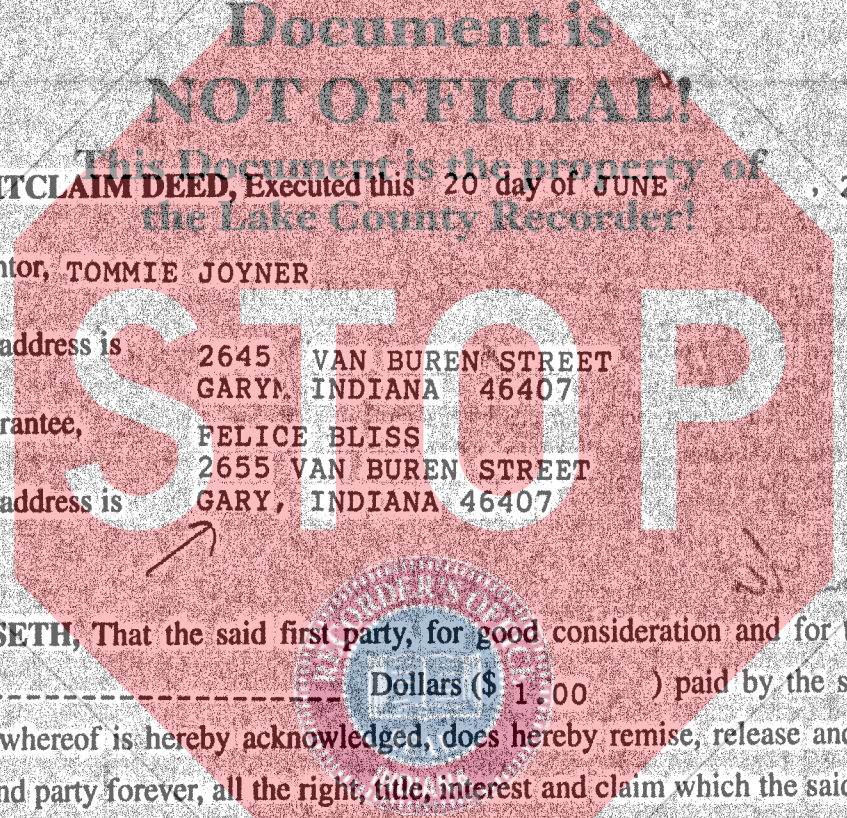
JUN 22 2000

MORRIS W. CARTER  
RECORDER

PETER BENJAMIN  
LAKE COUNTY AUDITOR

A298-10  
R298-04

### QUITCLAIM DEED



**THIS QUITCLAIM DEED**, Executed this 20 day of JUNE, 2000 (year),

by first party, Grantor, **TOMMIE JOYNER**

whose post office address is 2645 VAN BUREN STREET  
GARY, INDIANA 46407

to second party, Grantee, **FELICE BLISS**  
whose post office address is 2655 VAN BUREN STREET  
GARY, INDIANA 46407

**WITNESSETH**, That the said first party, for good consideration and for the sum of  
ONE----- 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:

DOUGLAS PARK ADD. S S.L. 36 BL. 3  
ALL L. 37 BL, 3  
B, 10 FT OF L, 38 BL.3  
KEY # 001-25-42-0206-0038  
AKA 2655 van buren street

02028

16.00  
E.P.  
CS



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:

Novella J. Hill  
Signature of Witness

Tommie Joyner  
Signature of First Party TOMMIE JOYNER

NOVELLA J. Hill  
Print name of Witness

TOMMIE JOYNER  
Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

Document  
NOT OFFICIAL!  
This Document is the property of  
the Lake County Recorder!

State of INDIANA

County of LAKE

On JUNE 20, 2000 before me, EVELYN WALLACE

appeared TOMMIE JOYNER 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.

Evelyn Wallace  
Signature of Notary EVELYN WALLACE

Affiant  Known \_\_\_\_\_ Produced ID \_\_\_\_\_  
Type of ID \_\_\_\_\_  
(Seal)

State of INDIANA

County of LAKE

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WITNESS my hand and official seal.

Evelyn Wallace  
Signature of Notary EVELYN WALLACE

Affiant  Known \_\_\_\_\_ Produced ID \_\_\_\_\_  
Type of ID \_\_\_\_\_  
(Seal)

MY COMMISSION EXPIRES  
JULY 8, 2000

Evelyn Wallace  
Signature of Preparer

EVELYN WALLACE  
Print Name of Preparer

Evelyn Wallace  
Notary  
My Commission Expires  
July 8, 2008

749 BURR ST, GART, IN. 46407  
Address of Preparer