

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

AFFIDAVIT

I, CLIFFORD E. DUGGAN, JR., who being sworn upon my oath, depose and state as follows:

1. All of the statements made in this affidavit are based upon my personal knowledge and are true and correct.

2. I prepared and notarized the Quit Claim Deed dated April 12, 1995 for the following property:

PART OF THE SOUTHEAST QUARTER OF THE NORTHEAST QUARTER OF SECTION 20, TOWNSHIP 34 NORTH, RANGE 8 WEST OF THE 2ND P.M., DECEASED AS COMMENCING AT A POINT 50 FEET WEST OF AND 984.4 FEET NORTH OF THE SOUTHEAST CORNER OF SAID QUARTER QUARTER SECTION, THENCE NORTH 164 FEET, THENCE WEST 660 FEET TO A POINT 1149.20 FEET NORTH OF THE SOUTH LINE OF SAID QUARTER QUARTER SECTION, THENCE SOUTH 164 FEET, THENCE EAST 660 FEET TO THE PLACE OF BEGINNING, IN LAKE COUNTY, INDIANA.

Key No. 7-16-68
Common Address: 12710 Grant Street, Crown Point, Indiana 46307

3. Warren K. Simstad did personally deliver the Quit Claim Deed to the Irrevocable Trust of Warren Keith Simstad on April 12, 1995.

4. The Quit Claim Deed was recorded in the Lake County Recorder's Office on August 17, 2000 due to being inadvertently placed in the file and the file closed in 1995.

5. Further affiant sayeth not.



Clifford E. Duggan, Jr., Attorney No. 4678-45
Dated: 9/1/00

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Before me the undersigned, a Notary Public in and for said County and State, came Clifford E. Duggan, Jr. and acknowledged the execution of the foregoing instrument as his free and voluntary act, this 1st day of September, 2000.

Christine E. Hazard

Christine E. Hazard, Notary Public
Commission Expires: 01/17/08
Lake County Resident
CHRISTINE E HAZARD
NOTARY PUBLIC STATE OF INDIANA
LAKE COUNTY
MY COMMISSION EXP. JAN. 17, 2008

Prepared by:
CLIFFORD E. DUGGAN, JR.
Attorney Number 4678-45
8300 Mississippi Street, Suite F
Merrillville, IN 46410

Please return file-stamped affidavit to: 11471 LAKEWOOD STREET, CROWN POINT, INDIANA 46307
FINAL ACCEPTANCE FOR TRANSFER

SEP 13 2000

PETER BENJAMIN
LAKE COUNTY AUDITOR

10825
10.00
Ac
e.s

FILED
2000 056803
2000 SEP 13 AM 2:25



Official Stamp

STATE OF INDIANA
LAKE COUNTY
FILED REC

2000 066803

2000 SEP 13 PM 2:06

MORNING W. CENTER
RECORDER

Document Mail Back to Information Sheet

This is where you want the recorded document sent back to when it has completed the recording process.

Name Tom Simstad

Address 11471 Lakewood Street

City St Zip Crown Point, IN 46307

Telephone (219) 769-2875

Signature Printed Tom Simstad by Christine Hazard

Signature Written Christine Hazard

Date of Signature 9/12/00

Check Number _____

Check Amount \$ 10.00 CASH

Office Use Only

Check Equals Amount Due Yes No

Total _____

Initials AC