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LAKE COUNTY  
FILED FOR RECORD

2002 059544

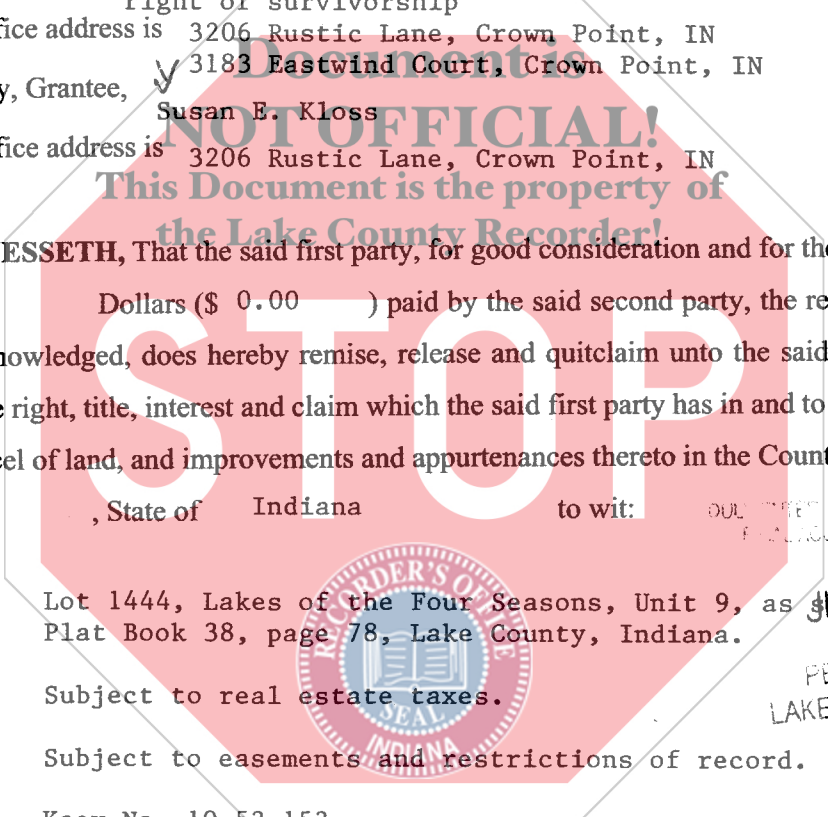
2002 JUL -2 PM 1:34

MORRIS W. CARTER  
RECORDER

**QUITCLAIM DEED**

**THIS QUITCLAIM DEED**, Executed this 2nd day of JULY, 2002 (year),

by first party, Grantor, Susan E. Kloss and Therese L. Gyure, as joint tenants with right of survivorship whose post office address is 3206 Rustic Lane, Crown Point, IN to second party, Grantee,  3183 Eastwind Court, Crown Point, IN Susan E. Kloss whose post office address is 3206 Rustic Lane, Crown Point, IN



**WITNESSETH**, That the said first party, for good consideration and for the sum of zero 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: DUPLICATE RECORDATION SUBJECT TO FINAL COUNTY ORDER FOR TRANSFER

Lot 1444, Lakes of the Four Seasons, Unit 9, as ~~sub~~<sup>sub 2</sup> in 2002 Plat Book 38, page 78, Lake County, Indiana.

Subject to real estate taxes.

Subject to easements and restrictions of record.

Kaey No. 10-52-153 Page 1 of 2.

PETER BENJAMIN  
LAKE COUNTY AUDITOR

[Signatures on following page.]

Initials of First Party

AHAAAEB

10-52-153  
N.H.  
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:

\_\_\_\_\_  
Signature of Witness

Susan E. Kloss  
Signature of First Party, Grantor

\_\_\_\_\_  
Print name of Witness

Susan E. Kloss  
Print name of First Party

\_\_\_\_\_  
Signature of Witness

Therese L. Gyure  
Signature of First Party, Grantor

\_\_\_\_\_  
Print name of Witness

Therese L. Gyure  
Print name of First Party

STATE OF INDIANA }  
COUNTY OF LAKE

On 7-2-2002 before me, a NOTARY PUBLIC,  
appeared SUSAN E. KLOSS & THERESE L. GYURE  
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.

Denise Hayward  
Signature of Notary  
DENISE HAYWARD  
(Seal)

Affiant  Known  Produced ID  
Type of ID DL



Susan E. Kloss  
Signature of Preparer  
Susan E. Kloss

Print Name of Preparer  
3206 Rustic Lane, Crown Point, IN  
Address of Preparer

\_\_\_\_\_  
Initials of First Party