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HOLD FOR MERIDIAN TITLE CORP

RECORDER

LF298-04
R298-04

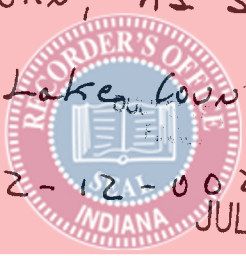
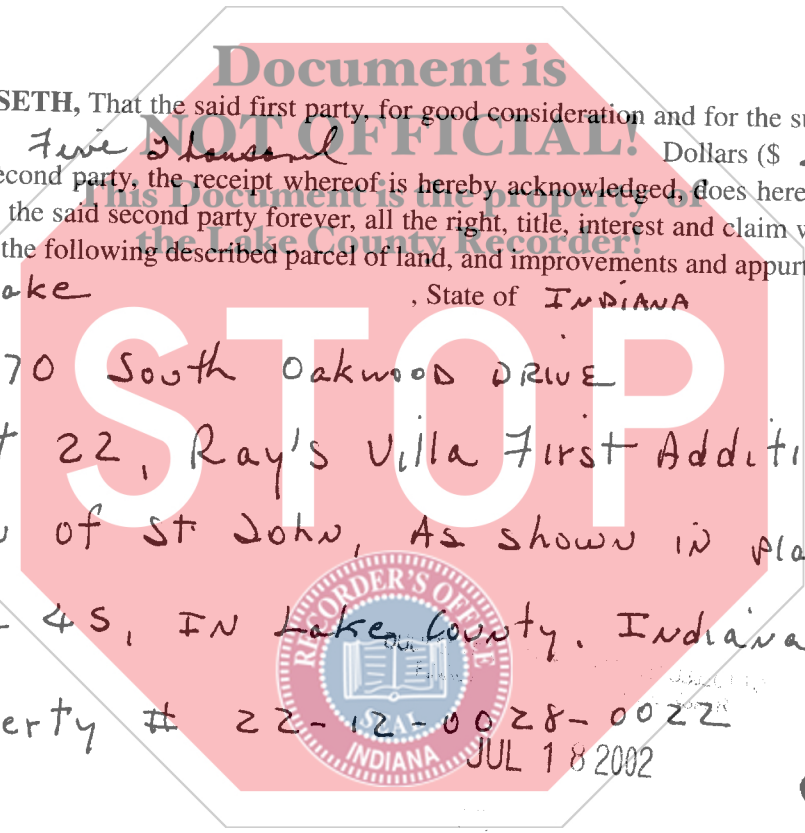
1598UC02

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 1ST day of July, 2002,
by first party, Grantor, Richard L. Smith
whose post office address is 12170 S. OAKWOOD DR. ST. JOHN IN.
to second party, Grantee, Tina M. Champagne
whose post office address is 12170 S. OAKWOOD DR. ST. JOHN IN

WITNESSETH, That the said first party, for good consideration and for the sum of
Thirty Five Thousand Dollars (\$ 35,000.00)
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:

12170 South Oakwood Drive
Lot 22, Ray's Villa First Addition to the
Town of St John, As shown in Plat Book 33,
Page 45, IN Lake County, Indiana
Property # 22-12-0028-0022



001272

16.00
M

MT

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

Richard L. Smith
Signature of First Party

Print name of Witness

Richard L. Smith
Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

State of _____
County of _____
On _____
appeared _____

before me,

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]
Signature of Notary
CORIE L. SHELBY, Notary Public
A Resident of Porter County, IN
My Commission Expires Nov. 11, 2007

Affiant _____ Known _____ Produced ID _____
Type of ID _____
(Seal)

State of _____
County of _____
On _____
appeared _____

before me,

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

