

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2002 099459

2002 NOV 1 AM 10:18

MORRIS W. CARTER
RECORDER

LF298-04
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 1st day of November, 2002,

by first party, Grantor, Gail M. Sipes (Gail M. Barnes)

whose post office address is 7550 Hunt Club Rd. Zionsville, Indiana 46077

to second party, Grantee,

Robert J. Schubert
8111W. 146th St.

Sher-Lyn Schubert
7305 W. 141st Pl.

whose post office address is

Cedar Lake, Indiana 46303

Cedar Lake, Indiana 46303

husband and wife -H.S.

WITNESSETH, That the said first party, for good consideration and for the sum of

Ten ~~-----~~ ~~00/100~~ Dollars (\$ 10.00)
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:

Lot 22, South Shore Addition to Cedar Lake, Indiana, as per plat thereof
recorded in Plat Book 20, Page 25 in the Office of the Recorder of Lake
County, Indiana



000067

*161
LP
cos*

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:

Debbie Stamps
Signature of Witness
CECILINE STAMPS
Print name of Witness

Gail M. Sipes (Gail M. Barnes)
Signature of First Party
GAIL M. SIPES (GAIL M. BARNES)
Print name of First Party

Signature of Witness

Print name of Witness

Signature of First Party

Print name of First Party

State of Indiana
County of Yukon
On November 1, 2003 before me, Gail M. Sipes (Barnes)
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.

Shironda L. David
Signature of Notary

SHIRONDA L. DAVID
NOTARY PUBLIC STATE OF INDIANA
MY COM. EXPIRES 12/31/04

Document is NOT OFFICIAL!
This Document is the property of the Lake County Recorder!
Affiant _____ Known _____ Produced ID _____
Type of ID _____ (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