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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

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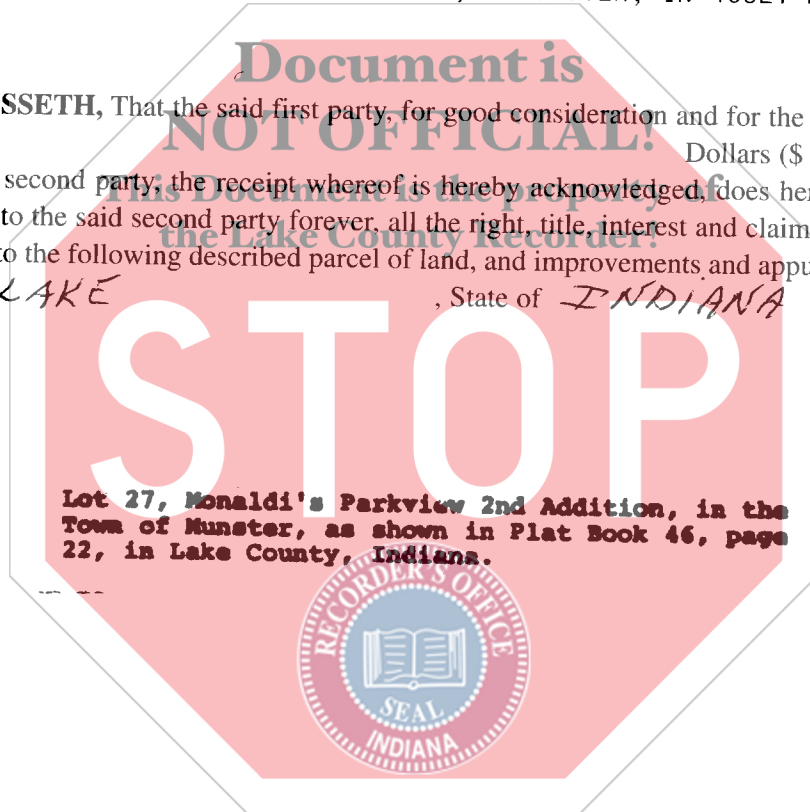
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LF298-04  
R298-04

### QUITCLAIM DEED

**THIS QUITCLAIM DEED**, executed this \_\_\_\_\_ day of JUNE, 20 04, by first party, Grantor, FRANCOISE GRIFFITH whose post office address is 8761 MADISON AVE MUNSTER, IN 46321-2411 to second party, Grantee, NANCY GAWLINSKI & FRANCOISE GRIFFITH whose post office address is 8761 MADISON AVE, MUNSTER, IN 46321-2411

**WITNESSETH**, That the said first party, for good consideration and for the sum of \_\_\_\_\_ Dollars (\$ \_\_\_\_\_) 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:



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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:

Lynn Kerr  
Signature of Witness

LYNN KERR  
Print name of Witness

Madeline Daynes  
Signature of Witness

MADELINE DAYNES  
Print name of Witness

Francoise Griffith  
Signature of First Party

FRANCOISE GRIFFITH  
Print name of First Party

\_\_\_\_\_  
Signature of First Party

\_\_\_\_\_  
Print name of First Party

State of Indiana  
County of Lake }

On June 9, 2004 before me,

FRANCOISE M. GRIFFITH  
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.

Judith L. Companik  
Signature of Notary



Affiant Known  Produced ID  
Type of ID Drivers License  
(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