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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2004 051374

2004 JUN 18 AM 10:11

MORRIS ... RECORDER

LF298-04
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 12th day of April, 2004,
by first party, Grantor, Juan Carlos Sosa
whose post office address is 834 Summer Street Hammond, IN 46320
→ to second party, Grantee, Juan and Candida Sosa h+w
→ whose post office address is 834 Summer Street Hammond, IN 46320.

WITNESSETH, That the said first party, for good consideration and for the sum of
zero dollars and no cents. 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:

Property I.D.: 26-36-0053-0016

Common Address: 5535 Walter Hammond, IN 46320

Legal Description: Lot 15 in E.W. Sohl's 4th Addition to
the City of Hammond, As per plat
thereof, Recorded in plat book 2,
page 39, in the office of the recorder
of Lake County, Indiana.

DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

JUN 18 2004

STEPHEN R STIGLICH
LAKE COUNTY CLERK

001600 25

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Rev. 10/02

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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:

Nanny Sosa
Signature of Witness

Nanny Sosa
Print name of Witness

Candida Sosa
Signature of Witness

Candida Sosa
Print name of Witness

[Signature]
Signature of First Party

Juan Carlos Sosa
Print name of First Party

Signature of First Party

Print name of First Party

State of Indiana
County of LAKE }

On June 16, 2004 before me,

appeared Candida Sosa, Nanny Sosa, Juan Sosa

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.

Sara Krause
Signature of Notary

Document is NOT OFFICIAL

Affiant _____ Known _____ Produced ID _____
Type of ID _____

This Document is the property of the Lake County Recorder!

(Seal)
SARA KRAUSE
NOTARY PUBLIC
STATE OF INDIANA
MY COMMISSION EXPIRES NOV. 3, 2010

State of _____
County of _____
On _____

before me,

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