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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2004 051376

2004 JUN 18 AM 10:11

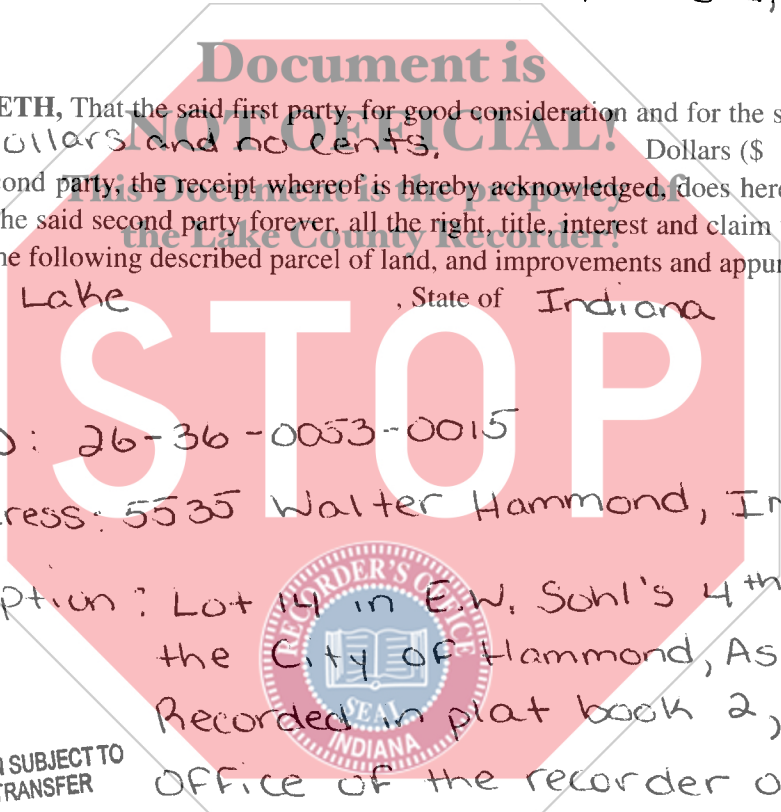
MORRIS W. STIGLICH
RECORDER

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 Sosa 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 ID: 26-36-0053-0015
 Common Address: 5535 Walter Hammond, IN 46320
 Legal Description: Lot 14 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.

ONLY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

JUN 18 2004

STEPHEN R STIGLICH
LAKE COUNTY JUDGE OF

001608

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Rev. 10/02

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1608
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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:

Vanny Sosa
Signature of Witness

Vanny 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 10, 2004 before me,

appeared Juan Sosa, Vanny Sosa, Candida 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

Affiant _____ Known _____ Produced ID _____
Type of ID _____

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 _____

Signature of Preparer

Print Name of Preparer

Address of Preparer

