



Chicago Title Insurance Company

THIS INDENTURE WITNESSETH

That Trudy Prince
of Lake County, and State of Indiana

2004 096369

RELEASE & QUIT CLAIM

To Trudy Prince and Richard J. Metzger Jr.
and Carolyn M. Metzger ^{A/J/T} W/F/R/O/S.
of Lake County, in the State of Indiana
for the sum of Ten dollars + 00/100 Dollars,

and other good and valuable consideration, the receipt of which is hereby acknowledged. The following described Real Estate, in Lake County, in the State of Indiana, to-wit:

FILED FOR RECORD
LAKE COUNTY
RECORDER'S OFFICE
NOV 12 2004

Document is NOT OFFICIAL!

TWIN Creek Block Two Lot 44


This Document is the property of the Lake County Recorder!

STOP

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

NOV 12 2004

STEPHEN R. STIGLICH
LAKE COUNTY AUDITOR



KEY NO: 18-28-0433-0044 1500 Lake Shore Dr
SEND TAX STATEMENTS TO: Richard J + Carolyn M. Metzger - Kewanna, IN
IN WITNESS WHEREOF, The said Trudy Prince 46939

Ha S hereunto set Her Hand on this 10th day of Nov 10 2004

State of Indiana County, ss:
Before me, the undersigned, a Notary Public, in and for said County and State, personally appeared the within named Trudy Prince

Trudy Prince Seal
Trudy Prince Seal

and acknowledged the execution of the foregoing Deed to be a voluntary act and deed, in witness whereof, I have hereunto subscribed my name and affixed my official seal. My commission expires:

PATRICIA R. SMIGLA Seal
Notary Public, State of Indiana Seal
Lake County Seal
My Commission Expires 9/24/06 Seal

Patricia R. Smigla Notary Public
Resident of Lake County

This instrument prepared by: Richard Metzger 001000 *dm ec*
Attorney at Law

INDIANA STATE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

State No.

Local No. 243-01

THE RECORDS IN THIS SERIES ARE CONFIDENTIAL PER IC 16-37-1-10

TYPE/PRINT IN PERMANENT BLACK INK

Form with fields for DECEASED-NAME (LEO PRINCE), SEX (MALE), TIME OF DEATH (3:42 A.M.), DATE OF DEATH (JANUARY 31, 2001), SOCIAL SECURITY NUMBER (325-05-3654), AGE (76), BIRTH (March 1, 1924), PLACE OF BIRTH (Chicago, IL), FACILITY NAME (THE COMMUNITY HOSPITAL), CITY (MUNSTER), COUNTY (LAKE), MARITAL STATUS (Married), SURVIVING SPOUSE (Trudy Cullom), OCCUPATION (Electrial Engineer), RESIDENCE (9805 Rose Lane), FATHER'S NAME (Leo Prince), MOTHER'S NAME (Wanda N.A.), INFORMANT (Trudy Prince), RELATIONSHIP (Wife), METHOD OF DISPOSITION (Burial), DATE AND PLACE OF DISPOSITION (February 2, 2001, Chapel Lawn Memorial Gardens), EMBALMER'S NAME (John T. Noble), LICENSE NO (9000031), FUNERAL HOME (Burns-Kish Funeral Home), CAUSE OF DEATH (Gastritis, Gastric Crisis), CERTIFIER (SMITA RAIKER, M.D.), MANNER OF DEATH (Natural), DATE OF INJURY (February 2, 2001).

DECEDENT

PARENTS

INFORMANT

DISPOSITION

CAUSE OF DEATH

CERTIFIER

HEALTH OFFICER

