

Quitclaim Deed

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 003301

2005 JAN 18 PM 4:05

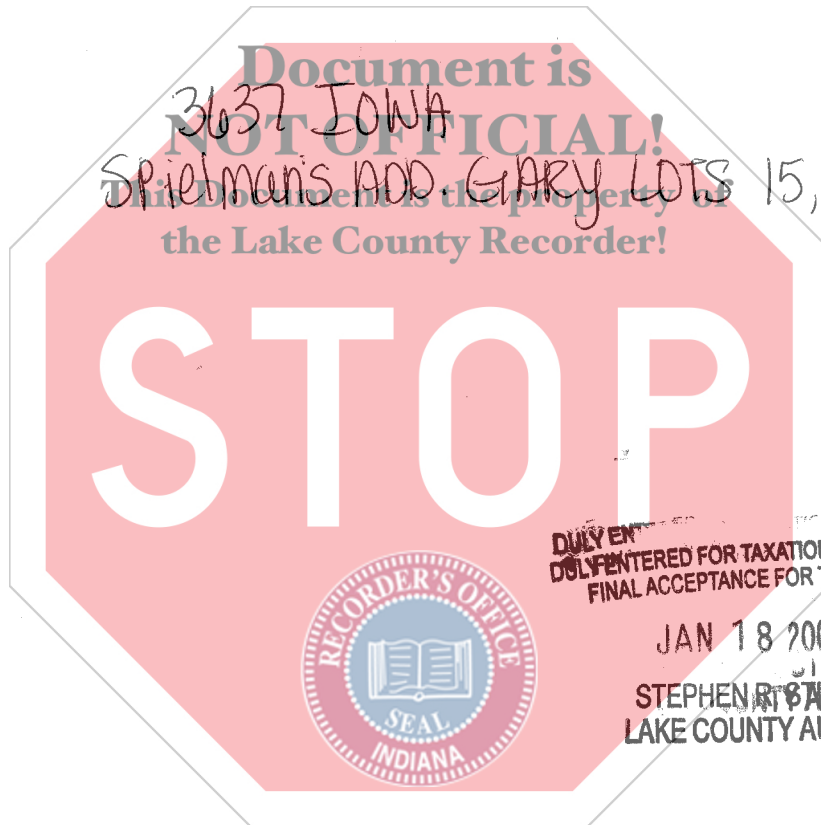
THIS QUITCLAIM DEED, executed this 18th day of January
by first party, Grantor, Wallace C. Hacker, Barbara J. Hacker
whose post office address is 3928 W. 39th Avenue, Hobart, IN. 46342
to second party, Grantee, Jennifer Wilson, Robert J. Wilson (Husband & wife)
whose post office address is 2420 W. 49th Avenue, Hobart, IN. 46342

MICHAEL J. DANN
RECORDER

WITNESSETH, That the said first party, for good consideration and for the sum of one dollar
Dollars (\$ 1.00)

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:

Key # 35-50-203-11



000795

17-
2P
cash

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:

Signature of Witness: _____

Print name of Witness: _____

Signature of Witness: _____

Print name of Witness: _____

Signature of First Party: Wallace C. Hacker & Barbara J. Hacker

Print name of First Party: WALLACE C. HACKER & BARBARA J. HACKER

Signature of Second Party: Jennifer Wilson, Robert J. Wilson

Print name of Second Party: Jennifer Wilson, Robert J. Wilson

Signature of Preparer: Jennifer Wilson

Print Name of Preparer: Jennifer Wilson

Address of Preparer: 2420 W 94th Ave. Hobart, IN. 46342

State of Indiana
County of Lake

On January 18, 2005 before me, Lois J. Pennock
appeared Wallace C. Hacker, Barbara J. Hacker, Jennifer Wilson + Robert J. Wilson

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.

Lois J. Pennock
Signature of Notary



Affiant s are Known Produced ID
Type of ID _____
(Seal)

