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2006 009304

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2006 FEB -6 PM 12: 50

MICHAEL A. BROWN RECORDER

LF298-04 R298-04

## **QUITCLAIM DEED**

THIS QUITCLAIM DEED, executed this 4th day of February , 20 006, by first party, Grantor, Sandy MIRANDA whose post office address is 1108 Wilcox Dtrret. Hammond, IN 46320 to second party, Grantee, Celestine ROZMAN whose post office address is 16318 So. Sawyer. Markham II 60428.

JAXES

Document is

WITNESSETH, That the said first party, for good consideration and for the sum of TEN DOLLARS /100 Dollars (\$ 10.00 ) 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:

Lot S 63 asnd 64, in block 4, in East Lawn addition to Hammond, as per Plat thereof, recorded in Plat Book No. 2, page 75, in the office of the Recorder of Lake County Indiana.

OULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

FEB 0 6 2006

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

002496

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Rev. 10/01

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Signature of Witness	Signature of First Party
	SANDY MIRANDA
CELESTINE ROMAN Print name of Witness	
Tim name of witness	Print name of First Party
Signature of Witness	Signature of First Party
Print name of Witness	Print name of First Party
appeared Sandy Miranda, with dom	s Isidro Vazquez nicile at 1108 Wilcox St. Hammond, IN.
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	d that by his/her/their signature(s) on the instrument the
person(s), or the entity/upon behalf of which the WITNESS/my hand and official seal.	person(s) acted, executed the instrument.
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Prescribed by the State Board of Accounts (2005)

County form 170

## Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do herby affirm under the penalties of perjury:

- 1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
- 2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

Signature of Declarant

Printed Name of Declarant