Quitclaim Deed

2006 009781 2006 FEB -7 PM 1: 30

MICHAEL A. BROWN

RECONDER THIS QUITCLAIM DEED, executed this 6th day of February by first party, Grantor, MalindA Jimerson whose post office address is 3909 W 18th Ave, GARY, IN 46404 to second party, Grantee, Koderick H. Jimerson whose post office address is 2909 w 18th Aue, Gary, IN 46404 79x mail WITNESSETH, That the said first party, for good consideration and for the sum of _____ONE Pollar Dollars (\$ 1,00) AND 00/100 cents 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 3 and the east 15 feet of Lot 4, Block 4, The Tolleston Park Subdivision, In the City of Gary, as Shown in Plat book 2, page 46, in LAKE County, INDIANA. Real EstaTE Property Known as 2909 W18th Avenue, GARVis Datute 454 the property of the Lake County Recorder! Key# 47-164-3 DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER FEB 0.7 2006 FEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

002614

Signed, sealed and delivered in presence of 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Signature of Witness:
Print name of Witness: Charles R. Scott Sc.
Signature of Witness: / Current of Court
Print name of Witness: VERONICH Y, Scott
Signature of First Party: Malindo Jumerson
Print name of First Party: Malinda Timerson
Signature of Second Party: Roberick H Jimess
Print name of Second Party: Roderck H Timers
Signature of Preparer NOT OFFICIAL!
Print Name of Preparer Address of Preparer 3817 Virginia ST. GARY, IN 46409
State of <u>INDIANA</u> County of <u>LAKE</u> On <u>2-6-2006</u> before me, Veronica Y. Death notary
appeared Roderick + Malinda Timerson
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.
Surviver 1. Death MINNER
Signature of Notary
AffiantKnownProduced ID
Type of ID
(Seal)

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