

2006 009782

2006 FEB -7 PM 1:39

MICHAEL A. BROWN
RECORDER

3

LF298-04
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 02 day of 07, 20 06

by first party, Grantor, **BOBBIE DMITROVICH**

whose post office address is

to second party, Grantee,

whose post office address is

1031 Boxwood Dr. MONSTER, IN 46321

KERRY SKIBINSKI

1031 Boxwood Dr. MONSTER, IN 46321

WITNESSETH, That the said first party, for good consideration and for the sum of **Ten Dollars** 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 #77 in COBBLESTONES Phase 1, block 2,
in the town of MONSTER, AS per plat thereof,
Recorded in plat book 69, page 48 in the office
of the Recorder of Lake County

MORE COMMONLY KNOWN AS 1031 Boxwood Dr.
MONSTER, IN

INDIANA
DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

FEB 07 2006

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

18-
FP
CS

Key Number
Tax ID. # (18) 28 0547 0075

002615

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:

Jacqueline C Mulvihill
Signature of Witness
Jacqueline C. mulvihill
Print name of Witness
Jana MCFarland
Signature of Witness
TINA M MCFARLAND
Print name of Witness

Bobbie Dmitrovich
Signature of First Party
BOBBIE DMITROVICH
Print name of First Party

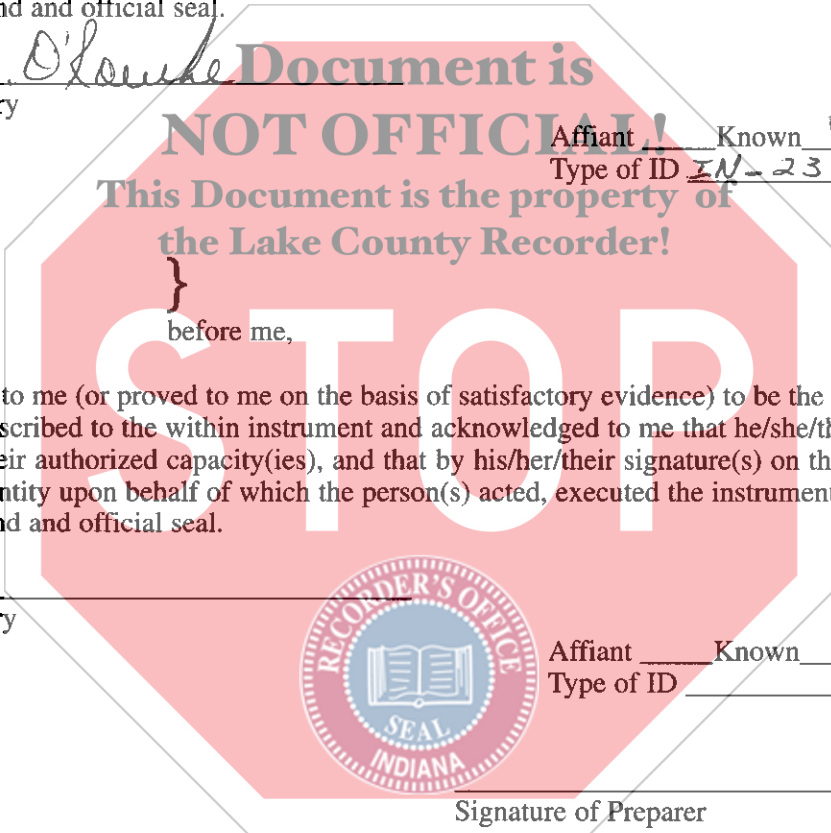
Signature of First Party

Print name of First Party

State of INDIANA
County of LAKE }
On February 7, 2006 before me,
appeared Bobbie Dmitrovich

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.

Betty L. O'Leary
Signature of Notary



Affiant Known Produced ID
Type of ID IN-2370-24-9459
(Seal)

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 _____
(Seal)

Signature of Preparer

Print Name of Preparer

Address of Preparer

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 hereby 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 numbers;
2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

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

