STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2006 010266

2006 FEB -8 AM 11:51

MICHAEL A. BROWN RECORDER

Above Space Reserved for Recording [If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

Quitclaim Deed

| Date of this Document: February 8, 2006 |
|---|
| Reference Number of Any Related Documents: |
| Name Carolyns Symm Stock + Wancy fee Stocker |
| Street Address City/State/Zip Street Address City/State/Zip City/State/Zip City/State/Zip City/State/Zip City/State/Zip City/State/Zip City/State/Zip |
| Grantee: Name Charles & the Lake County Recorder! |
| Street Address 2620 W. 37th QUL City/State/Zip Jakes Statem Nobout, On 46342 |
| Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): LOT 28, BLOCK LO PLOE BOOK 23, Page 55 Resub Garden |
| Assessor's Property Tax Parcel/Account Number(s): 35 50 0236 0026 |
| THIS QUITCLAIM DEED, executed this day of February, 20_0(e), by first party, Grantor, Carolem Piper Stoven + Name (01 Stoven), whose mailing address is 3731 E. 29 - Ave take Statem An 44405 to 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| whose mailing address is 2620 W. 37 to Acknow source to the 46342 |
| WITNESSETH that the said first party, for good consideration and for the sum of |
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| which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of, State of, State of, State of |
|--|
| to wit: 10T 28 in Block le in Resubolivio en of Carolin |
| Homes as Der plat thereof as recorded in Plat |
| Book 23, page 55 in the Office of the Recorder of |
| Lake County, Undurina |
| IN WITNESS WHEREOF , the said first party has signed and sealed these presents the day and year first written above. Signed, sealed and delivered in the presence of: |
| Signature of Witness X |
| Print Name of Witness ARTH: 150.018 |
| Signature of Witness |
| Print Name of Witness |
| Signature of Grantor CAROLYN SYNN STOVER, Namy fle Tovel Print Name of Grantor CAROLYN SYNN STOVER, NONCY LEE STOVER |
| Print Name of Grantor CAROLYNO SYNDON STOUR, NONCY Lee Stoull |
| State of |
| On Stope Colon before me, appeared a colon type Store (Norcy Lee Store , 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. |
| Finance of Alexander |
| Signature of Notary Lake County My Commission Expires April 16, 2009 |
| AffiantKnownProduced ID |
| Type of ID |
| (Seal) |
| WOJANA THE |
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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