

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 011028

2006 FEB 10 AM 11:21

MICHAEL A. BROWN
RECORDER

QUIT-CLAIM DEED

MAIL TAX BILLS TO:

TAX KEY NUMBER: 07-33-58-03

Thomas & Lisa Duncan
2525 Naples Drive
Schererville, IN 47375

THIS INSTRUMENT WITNESSETH, That

Thomas P Duncan
of Schererville, ~~the State of~~ Indiana
Releases and Quit Claims to

Thomas P Duncan and Lisa G Duncan
of Schererville, ~~the State of~~ IN **for and in consideration of \$1.00 (One) dollar and other valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the following Real Estate in County in the State of Indiana, to wit:**

THE EAST 100 FEET OF THE WEST 890 FEET OF THE SOUTH
252 FEET OF THE SOUTHWEST QUARTER OF THE SOUTHWEST
QUARTER OF SECTION 14, TOWNSHIP 34 NORTH, RANGE 9
OF THE SECOND PRINCIPAL MERIDIAN, IN LAKE COUNTY,
INDIANA.

DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

FEB 10 2006

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

Stewart Title Services
of Northwest Indiana
The Pointe
5521 W. Lincoln Hwy.
Crown Point, IN 46307

COMMONLY KNOWN AS: 7717 124th PLACE, CROWN POINT, IN
46307

State of Indiana ss: Lake
Before me, the undersigned, a Notary Public in and for said County
and State, this 27 day of January, 2006 personally appeared:

Dated this 27 day of January, 2006

Thomas P. Duncan
Lisa G. Duncan

Thomas P. Duncan and Lisa G. Duncan 1/27/06

And acknowledged the execution of the foregoing deed, in witness
whereof, I have hereunto subscribed my name and affixed my
official seal.

Melissa M. Pulido
Notary Public

My commission Expires: 6/29/2011
Resident of: Lake

This instrument prepared by: Roger L. DeGriff

MELISSA M. PULIDO
NOTARY PUBLIC - LAKE COUNTY, INDIANA
MY COMMISSION EXPIRES JUNE 29, 2011
RESIDENT LAKE COUNTY INDIANA

#1

002973

17-
ZP
SIS

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.

