

2006 011166

2006 FEB 10 PM 3: 21

MICHAEL A. BROWN  
RECORDER

MAIL TAX BILLS TO: 621 Redbud Lane, Lowell, Indiana 46356

# ① QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that **ROBERT A. FREDERICKSEN**, Grantor, of adult age, of Lake County, in the State of Indiana,

QUITCLAIMS to **CONNIE F. FREDERICKSEN**, Grantee, of adult age, of Lake County, in the State of Indiana,

in consideration of Ten and 00/100 Dollars (\$10.00) and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the following described real estate in Lake County, in the State of Indiana, to-wit:

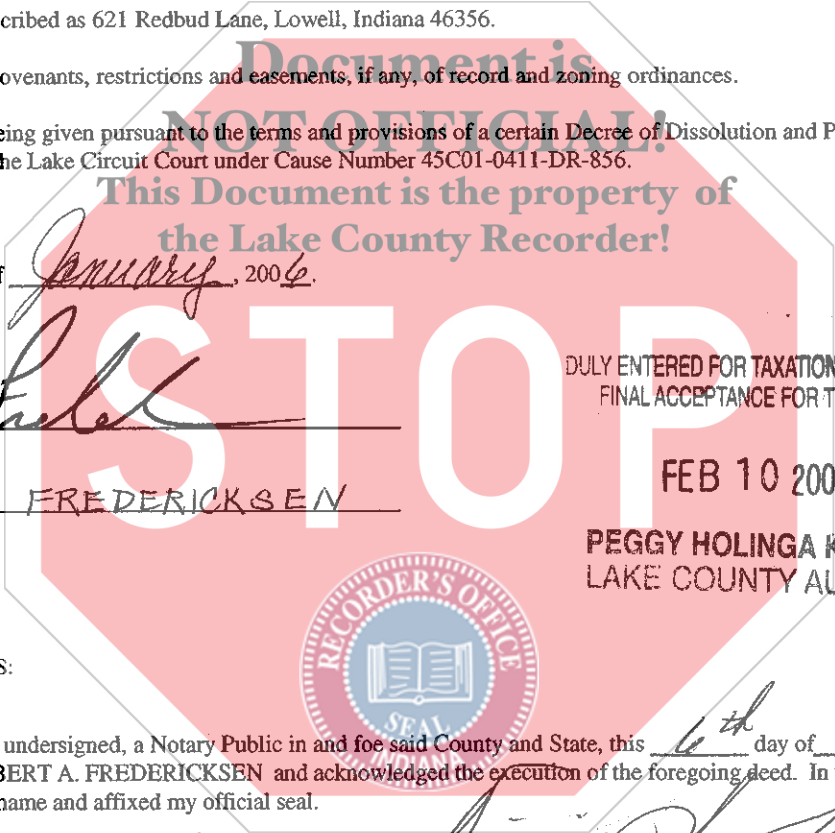
LOT 65 IN TIMBER SPRINGS ADDITION, UNIT 3, IN THE TOWN OF LOWELL, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 76 PAGE 13, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Key Number: 17-04-0146-0005

Commonly described as 621 Redbud Lane, Lowell, Indiana 46356.

Subject to all covenants, restrictions and easements, if any, of record and zoning ordinances.

This Deed is being given pursuant to the terms and provisions of a certain Decree of Dissolution and Property Settlement Agreement in the Lake Circuit Court under Cause Number 45C01-0411-DR-856.



Dated this 6<sup>th</sup> day of January, 2006.

[Signature]  
(Signature)

ROBERT A. FREDERICKSEN  
(Printed Name)

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

FEB 10 2006

03044

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

STATE OF INDIANA )  
) SS:  
COUNTY OF LAKE )

Before me, the undersigned, a Notary Public in and for said County and State, this 6<sup>th</sup> day of Jan., 2006, personally appeared **ROBERT A. FREDERICKSEN** and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My Commission Expires: 09-09-09  
My County of Residence: Lake

[Signature]  
(signature) NOTARY PUBLIC

VIVIAN W. HALL  
(printed name)

\$16  
T/E  
CAN

Prepared by: Kirk E. Marrie, Attorney at Law, Atty. I.D. #18409-45, 1524 W. 96<sup>th</sup> Avenue, Crown Point, IN 46410 Ph: (219) 662-6400

TICOR CP 920060246 Mann

Declaration

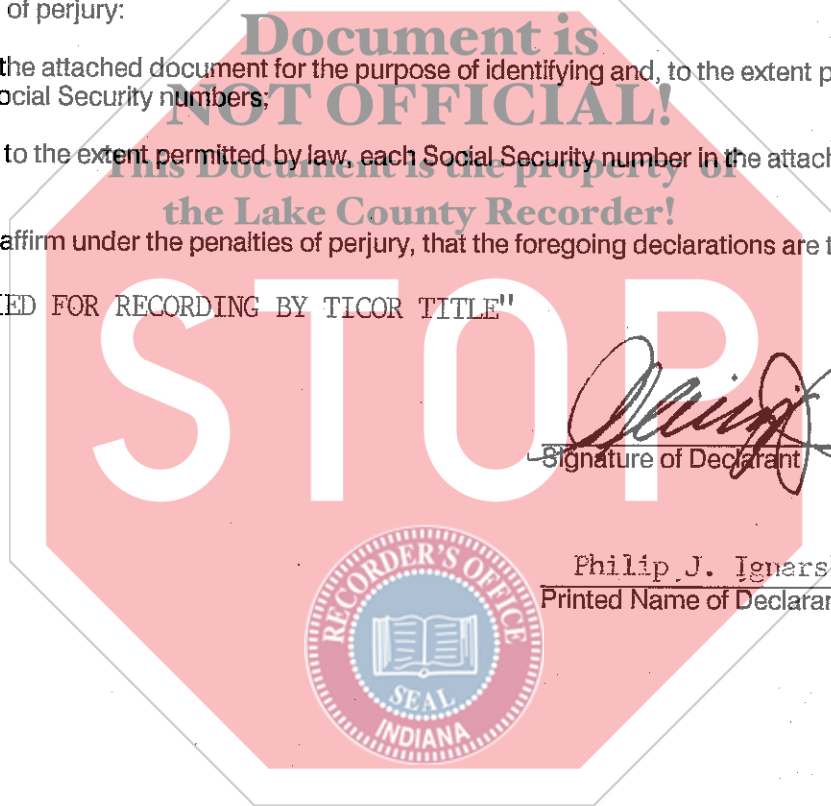
This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

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.

"VERIFIED FOR RECORDING BY TICOR TITLE"



*Philip J. Ignarski*  
Signature of Declarant

Philip J. Ignarski  
Printed Name of Declarant