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STATE OF INDIANA
LAKE COUNTY
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2006 015375

2006 FEB 27 PM 3:31

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: 2-27-06

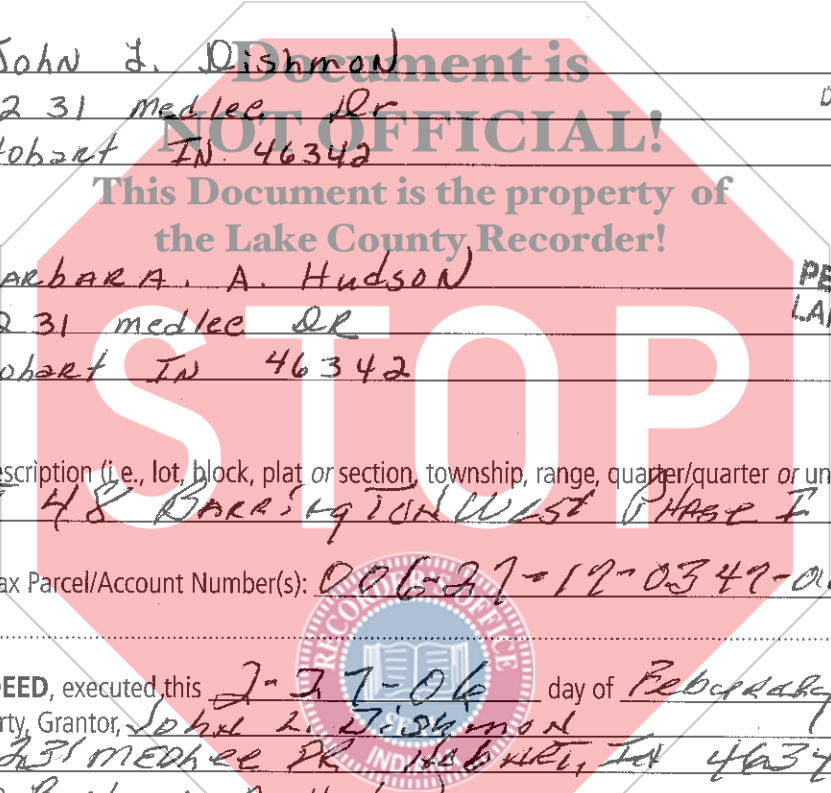
Reference Number of Any Related Documents: _____

Grantor:

Name John L. Dishman
Street Address 1231 Medlee Dr
City/State/Zip Hobart IN 46342

Grantee:

Name BARBARA A. HUDSON
Street Address 1231 medlee dr
City/State/Zip Hobart IN 46342



DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

FEB 27 2006
PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): LOT 48 BARRINGTON WEST PHASE I PLAT Book 96
Page 78

Assessor's Property Tax Parcel/Account Number(s): 006-27-12-0342-0011

THIS QUITCLAIM DEED, executed this 2-27-06 day of February, 2006, by first party, Grantor, John L. Dishman, whose mailing address is 1231 Medlee Dr, Hobart, IN 46342, to second party, Grantee, Barbara A. Hudson, whose mailing address is 1231 medlee dr, Hobart IN 46342

WITNESSETH that the said first party, for good consideration and for the sum of \$100 Dollars (\$ _____) 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,

004197
18.00
D.M.

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 48 BARRINGTON WEST PHASE I PLAT BOOK 86
Page 78

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 _____
Print Name of Witness _____

Signature of Witness _____
Print Name of Witness _____

Signature of Grantor John Dishmore
Print Name of Grantor JOHN L. DISHMORE

State of INDIANA
County of LAKE

On FEBRUARY 27, 2006, before me, BARBARA J. BORTOLI,
appeared JOHN L. DISHMORE, 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.

Barbara J. Bortoli
Signature of Notary

Affiant Known X Produced ID
Type of ID DRIVERS LICENSE
(Seal)

BARBARA J. BORTOLI
Notary Public, State of Indiana
County of Lake
My Commission Expires 05/19/2008

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 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 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.



John L. Fishman
Signature of Declarant

John L. Fishman
Printed Name of Declarant

