

14-19-0048-0011
14-19-0048-0012
14-19-0048-0013
Parcel No. 14-19-0048-0014

LAKE COUNTY
FILED FOR RECORD

QUITCLAIM DEED
2006 016058

2006 FEB 28 PM 4:12

THIS INDENTURE WITNESSETH, That **Secretary of Veterans Affairs, an Officer of the United States of America**, whose address is **Department of Veterans Affairs, Washington, DC 20420**, of ORANGE County, in the State of FLORIDA QUITCLAIMS to **Fernanda Heridia**, an adult of LAKE County, in the State of INDIANA, for the sum of Ten and No/100---Dollars (\$10.00) and other valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the following described real estate in **Lake County, State of Indiana**:

See Attached Exhibit "A"

Subject to any and all easements, agreements and restrictions of record. The address of such real estate is commonly known as **2823 Clay Street, Lake Station, Indiana 46405**. Tax bills should be sent to Grantee at such address unless otherwise indicated.

The undersigned person executing this deed on behalf of Grantor represents and certifies that they are duly authorized and fully empowered to execute and deliver this deed as the Realty Officer of Ocwen Loan Servicing, LLC, VAREO Senior Manager for the Department of Veterans Affairs.

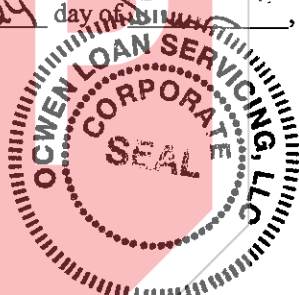
Grantor, for itself and its heirs, executors and administrators, does hereby covenant with Grantee, his heirs and assigns, that Grantor, has not made, done, executed or suffered any act or thing whereby the above described premises or any part thereof now are or at any time hereafter shall or may be imperiled, charged, or encumbered in any manner whatsoever; and Grantor will forever warrant and defend the title to the above granted premises against all persons lawfully claiming the same from, through or under Grantor.

Pursuant to provisions of 38 U.S.C. 3720 (a) (6) the Secretary of Veterans Affairs does not seek to exercise exclusive jurisdiction over the within described property.

IN WITNESS WHEREOF, Grantor has executed this deed this 24 day of Jan, 2006.

Secretary of Veterans Affairs,
An officer of the United States

By: [Signature]
Its: **MICHAEL MORELAND**
Director, VA REO
OCWEN Loan Servicing LLC
Pursuant to a delegation of authority
Contained in 38 C.F.R. § 36.4342 (f)



STATE OF FLORIDA)
COUNTY: ORANGE)

On this date, before me personally appeared **MICHAEL MORELAND**
Director, VA REO, pursuant to a delegation of authority contained in 38 C.F.R. § 36.4342 (f) to me known to be the person who executed the foregoing instrument on behalf of the Secretary of Veterans Affairs, and acknowledged that he executed the same as the free act and deed of said Secretary.

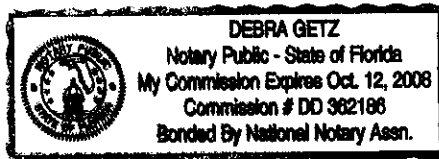
In Witness Whereof, I have hereunto set my hand and affixed my official seal in the State of Florida aforesaid, this 24 day of Jan, 2006.

My Commission Expires: _____
[Signature]
Notary Public

Residing in Lake County
[Signature]
Printed Name

This instrument was prepared by: Nelson & Frankenberger
Return deed to: GRANTEE - 2823 CLAY ST., LAKE STATION, IN 46405

Send tax bills to: GRANTEE
2823 CLAY ST.
LAKE STATION, IN 46405



DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

H:\REO Closings\Forms\DEEDQUITOVA.doc

FEB 28 2006

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

COMMUNITY TITLE COMPANY
FILE NO L 33357

004344

C.M.
1900
D.D.M.

EXHIBIT A

LOTS 11, 12, 13, AND 14 IN BLOCK 2 IN FIRST SUBDIVISION OF EAST GARY, NOW LAKE STATION, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 7, PAGE 9, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.



Prescribed by the
State Board of Accounts
(2005)

County Form 170

Declaration

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

I, the undersigned verifier 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.

