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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2006 019301

2006 MAR -8 PM 2:40

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: 3/8/06

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

Reference Number of Any Related Documents: \_\_\_\_\_

MAR - 8 2006

Grantor:

Name

Neysa Holman

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

Street Address

453 East 78th Place

City/State/Zip

Merrillville, IN 46410

Grantee:

Name

Monique D. Williams

Street Address

741 Baliwick Dr. SE

City/State/Zip

Atlanta, GA 30312-3602

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Lot Fourteen (14), Block Fourteen (14) Broadway

Addition to Gary Lake County, IN AKA- 1825 Massachusetts St. Gary, IN

Assessor's Property Tax Parcel/Account Number(s): 254101450014

THIS QUITCLAIM DEED, executed this

8th

day of

March

2006, by first party, Grantor,

Neysa Holman

, whose

mailing address is

453 East 78th Place, Merrill, IN 46410

, to

second party, Grantee,

Monique D. Williams

whose mailing address is

741 Baliwick Dr. SE, Atlanta, GA 30312-3602

WITNESSETH that the said first party, for good consideration and for the sum of gift

Dollars (\$0) 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,

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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 LAKE, State of IN  
to wit: 1825 Massachusetts St. Gary, IN  
Lot Fourteen (14) Block Fourteen (14) Broadway  
Addition to Gary, Lake County, IN AKA #25 91-014514

**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 Neysa Holman  
Print Name of Grantor Neysa Holman

State of INDIANA  
County of LAKE

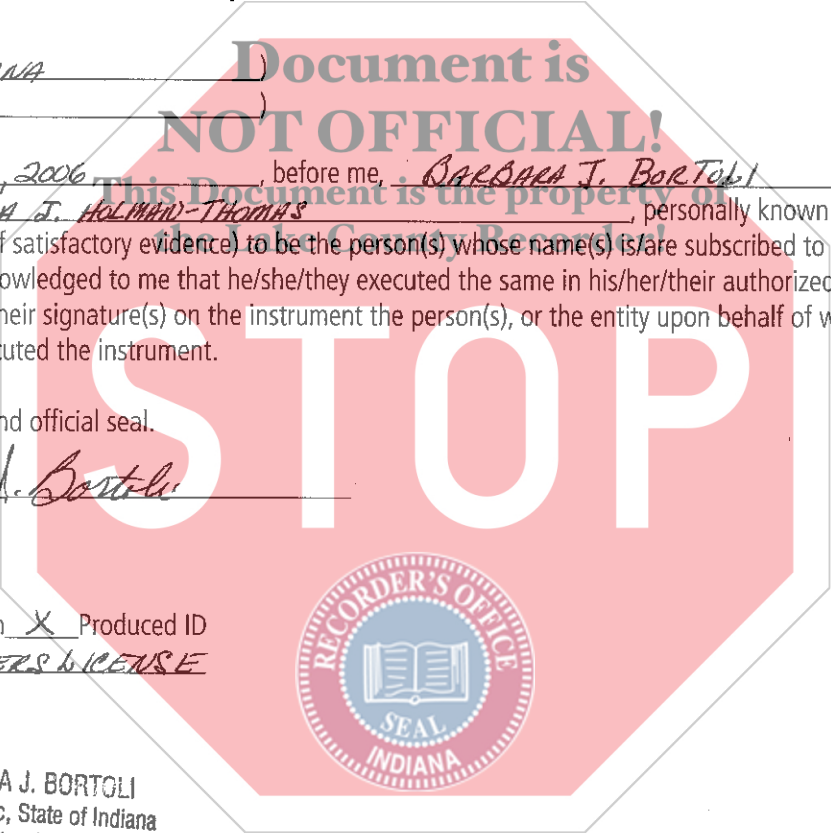
On MARCH 8, 2006, before me, BARBARA J. BORTOLI,  
appeared NEYSA J. HOLMAN-THOMAS, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in 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  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



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.



Neysa Holman  
Signature of Declarant

Neysa Holman  
Printed Name of Declarant