## **QUITCLAIM DEED**

THIS QUITCLAIM DEED, Executed this 21<sup>st</sup> day of **March**, 2006, by first party **Lu'Tonn C. Thompson**, **Sr.** whose post office address is 2718 W. 11<sup>th</sup> Avenue, **Gary**, **Indiana 46404** to second party, **Lolita R. Feagin-Thompson** whose post office address is 5661 Washington Street, **Merrillville**, **Indiana 46410**.

WITNESSETH, That the said first party, for good consideration and for the sum of \$450.00 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 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 28 AND 29, IN BIOCK 3, IN SOUTHAND SUBDIVISION, IN THE TOWN OF MEXIMINITE, AS PER PLAT THERE OF, RECORDED IN PLAT BOOK 19, Pg. 2.

Land (both Lots) and Property of Brick and White Single Family Home Located at 5661 Washington Street, Merrillville, Indiana 46410 Parcel # 8-15-89-28 +29 IN THE OFFICE of THE RECORDER of LAKE COWNY IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of: Witness Witness STATE OF **COUNTY OF** Sally before me, personally known to me (e) & LUTONA Thompson 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/theis 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. Unknown Affiant: Known **DULY ENTERED FOR TAXATION SUBJECT TO** ID Produced: 8919 - 55 - 664 9 FINAL ACCEPTANCE FOR TRANSFER 7375 3.3 006419 MAR 2 4 2006 SALLY REMPIS Resident of Lake County, IN My commission expires September 21, 2009 [Seal] PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

Prescribed by the State Board of Accounts (2005)

County form 170

## Declaration

## **Jocument** is

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 herby 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

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are

Printed Name of Declaran