

LF298-f14
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 20TH day of MARCH, 2006

2006 024867

By first party, Grantor, **Robert Adelphia**
Whose post office address is 7117 Ontario Hammond, In 46323
To second party, Grantee, **Ramon Deluna**
Whose post office address is 2429 E. 142nd St. Chicago IL 60633

WITNESSTH, That the said first party, for good consideration and for the sum of

Twenty four thousand six hundred dollars Dollars **\$24,600.00**

paid by the said second party, the receipt whereof is hereby acknowledged, does hereby
remit, 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:
5522 Alice St. Hammond, IN 46320

SOHL'S 2ND ADD. LOT 11, BLOCK 3, AND N. 8 FT. OF LOT 12, BLOCK 3
RECORDED IN PLAT BOOK 2, PAGE 12, IN THE OFFICCE OF THE RECORDER OF
LAKE COUNTY, INDIANA

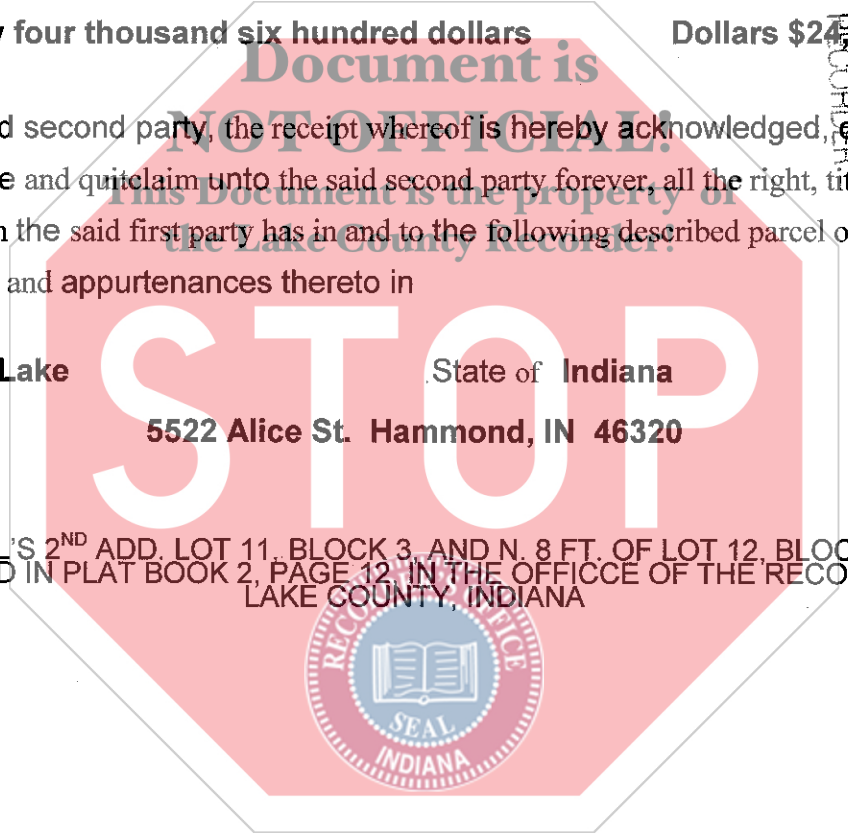
DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

MAR 27 2006

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

006546

\$19
CS
CAW



STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
2006 MAR 27 11:20 AM
MICHELLE A. POYNTON
RECORDER

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:

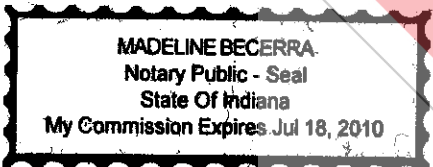
Signature of Witness _____ Signature of First Party [Signature]
Print name of Witness _____ Print name of First Party Robert Adelphia
Signature of Witness _____ Signature of First Party _____
Print name of Witness _____ Print name of First Party _____

State of **INDIANA**
County of **LAKE**
On **March 20, 2006** before me, **Madeline Becerra**

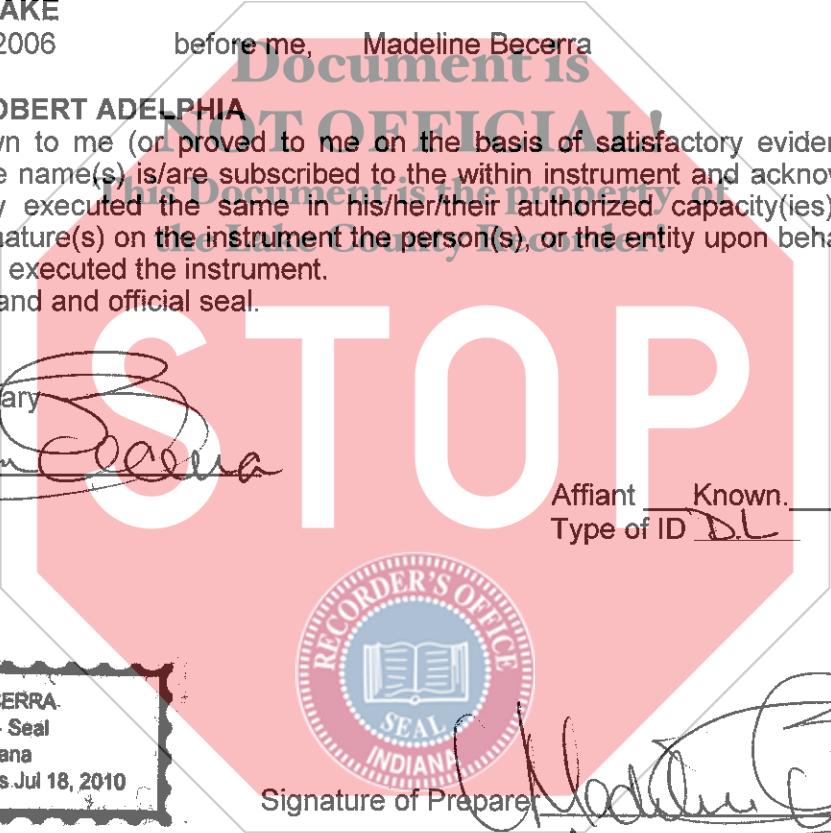
Appeared **ROBERT ADELPHIA** personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their 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.

Signature of Notary [Signature]

Affiant Known Produced
Type of ID DL
(Seal)



Signature of Preparer [Signature]
Print name of Preparer MADeline Becerra
Address of Preparer 7017 Polk Ct



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.



Ramon de Luna
Signature of Declarant

RAMON de Luna
Printed Name of Declarant