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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 072381

2006 AUG 18 PM 3:06

MICHAEL J. TOWN
RECORDER

A298-10
R298-04

QUITCLAIM DEED

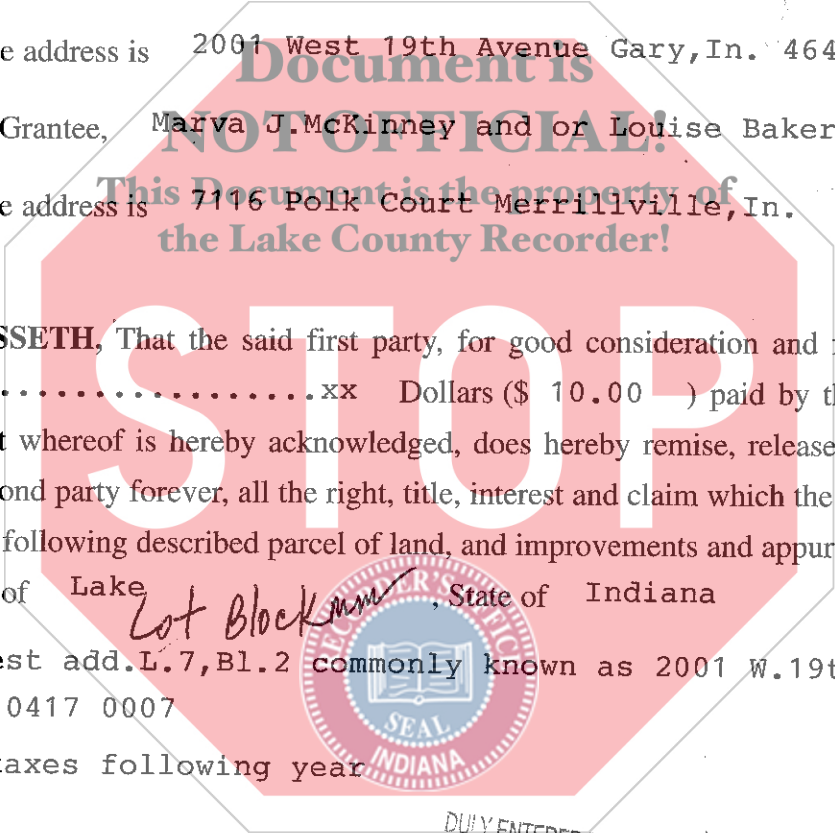
THIS QUITCLAIM DEED, Executed this 12th day of June, 2001 (year),

by first party, Grantor, Astoria ^{N m m w} Berry

whose post office address is 2001 West 19th Avenue Gary, In. 46404

to second party, Grantee, Marva J. McKinney and or Louise Baker

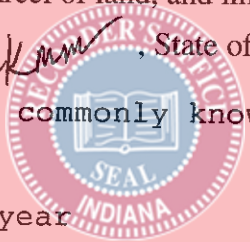
whose post office address is 7116 Polk Court Merrillville, In.



WITNESSETH, That the said first party, for good consideration and for the sum of Ten.....xx Dollars (\$ 10.00) 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 there- to in the County of Lake, State of Indiana to wit:

Gary Hillcrest add. L.7, Bl.2 commonly known as 2001 W.19th Ave.
Key # 25 43 0417 0007

Subject to taxes following year

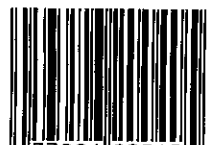


DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

AUG 18 2006

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

16040



18-
EP
CS

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:

Mosie M Wallace
Signature of Witness
Mosie M. Wallace
Print name of Witness

Astoria Berry
Signature of First Party
ASTORIA BERRY
Print name of First Party

Signature of Witness

Print name of Witness

Signature of First Party

Print name of First Party

State of INDIANA }
County of LAKE }
On June 12, 2001 before me, PAMELA EAST
appeared ASTORIA BERRY

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.

PAMELA EAST
Signature of Notary

3-15-10

Affiant Known _____ Produced ID
Type of ID _____
(Seal)

State of _____ }
County of _____ }
On _____ before me,
appeared _____

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

Affiant _____ Known _____ Produced ID
Type of ID _____
(Seal)

"I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT I HAVE TAKEN REASONABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW."
PREPARED BY: MOSIE M WALLACE

Signature of Preparer

Print Name of Preparer

Address of Preparer

(2)

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.