

2

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 083791

2006 SEP 25 AM 10: 56

LF298-04
R298-04

MICHAEL A. BROWN
RECORDER

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 22nd day of September, 2006,
by first party, Grantor, FRANK COLBERT BONE
whose post office address is 1220 ALLEN ST - GARY, IN 46403
to second party, Grantee, LISA-MARIE BONE
whose post office address is 1220 ALLEN ST - GARY, IN 46403

→

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

This Document is the property of
the Lake County Recorder!

1220 ALLEN STREET
GARY, IN 46403

AETHA MANOR 2ND SUB
3 and EAST
ALL L. 24 BL. ~~25~~ 25 FT

HOUSE - 3 BED ROOMS

L. 23 BL. 3

FB

Living Room / DEN
KITCHEN
GARAGE
Utility Room



DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

Parcel # 25-41-267-24

SEP 25 2006
PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

018946

18
CS
JW

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:

Lisa-Marie Bone
Signature of Witness
Lisa-Marie Bone
Print name of Witness

Frank C. Bone
Signature of First Party
FRANK C. BONE
Print name of First Party

Signature of Witness

Print name of Witness

Signature of First Party

Print name of First Party

State of IN }
County of LAKE
On ~~22nd Jun~~ before me,
appeared 09-22-06

FRANK C. BONE

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.

Linda W. Robinson
Signature of Notary

LINDA W ROBINSON
Notary Public, State of Indiana
County of Lake

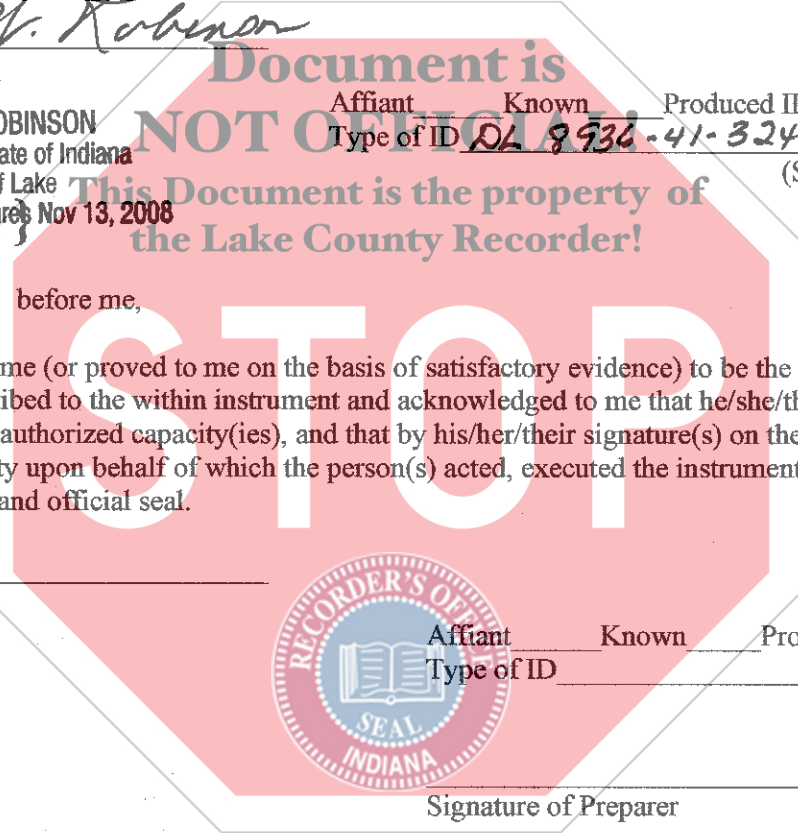
My Commission Expires Nov 13, 2008

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 DL 8936-41-3248
(Seal)

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

Signature of Preparer

Print Name of Preparer

Address of Preparer

"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: FRANK BONE