2006 086743

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2006 OCT -4 AMII: 17

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: September 29, 2006	
Reference Number of Any Related Documents:	
Street Address City/State/Zip Crantor: Name Rafael Gonzalezis Landa Halense Hammond, 12 16323 Crantor:	
Street Address City/State/Zip	
Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Lot 37, Block 13, Cline Gardens, 2nd Add Assessor's Property Tax Parcel/Account Number(s): 26-32-0235-0037	
THIS QUITCLAIM DEED, executed this twenty minth day of September 20_06, by first party, Grantor, Rafael Bonzalez , whose mailing address is 6719 Neuada Ave Hannord, IN 46323 , to second party, Grantee, Lisa Sarwacinski aka Lisa Kalnynas , whose mailing address is 6607 New Hanpshire Ase Hannord, IN.	,
WITNESSETH that the said first party, for good consideration and for the sum of one handred dollars Dollars (\$	•
OCT 0 4 2006 Page 1 of 2 PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR LAKE COUNTY AUDITOR	S)

to wit: Lot 37, Block 13, Cline Gardens Second Addition
to wit: Lot 37, Block 13, Cline Gardens Second Addition to the City of Hammond Indiana, as per plat
thereof, recorded in Plat Book 32, page 81, 10
the Office of the Recorder of Lake County, Indiana
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 writiess
Print Name of Witness <u>Lisa Ann Sarwacins Ki</u>
Signature of Witness Print Name of Witness Core Ha Laulin
Signature of Grantor Print Name of Grantor Rafael Godzalez
State of
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, execute <mark>d the</mark> instrument.
WITNESS my hand and official seal. Signature of Notary
Affiant Known Produced ID Type of ID Dr. vers license (Seal) LIANA ROSE CONZALEZ NOTARY PUBLIC STATE OF INDIANA MY COMMISSION EXP. JAN. 23,2010 "I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT I HAVE TAKEN REASON-ABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW," PREPARED BY: PREPAR