2005 089739

THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. SELECTING A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS AND INSERTING SPECIAL CLAUSES MAY CONSTITUTE THE PRACTICE OF LAW, WHICH SHOULD BE PERFORMED ONLY BY A LAWYER.

Mail tax bills to:

CHICAGO TITLE INSURANCE COMPANY

1947 E. 1000 N. Wheatfield IN 46392

wheatheid, IN 46392
CM 620065590 QUITCLAIM DEED
THIS INDENTURE WITNESSETH, That DOROTHY J. SORENSEN ("Grantor") of Lake County in
the State of <u>Indiana</u> QUITCLAIMS TO <u>SUE ANN BELL</u> , AS TRUSTEE UNDER A CERTAIN TRUST
AGREEMENT DATED THE 22 ND DAY OF FEBRUARY, 1996 ("Grantee")of LAKE
County in the State of INDIANA in consideration of One Dollar and other valuable consideration, the receipt and sufficiency
of which are hereby acknowledged, the following described real estate in Lake County, in the State of Indiana:
The Fractional West Half of the Southwest Quarter of Section 19, Township 33 North, Range 7
West of the Second Principal Meridian in Lake County, Indiana; excepting therefrom the South
860 feet of the West 613.66 feet of said Fractional West Half of the Southwest Quarter. Subject
to existing legal highways, ditches, drains, and easements, if any, and subject to applicable zoning regulations.
(Do not mark below this line)
Dated this 14 day of September 11 the proper 2006 DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER
Dorthy & Sound the Lake County Recorder!
(Signature) 0CT-112006
Dorothy J. Sorensen PEGGY HOLINGA (ALONA)
(Printed Name) LAKE COUNTY AUDITOP
STATE OF INDIANA COUNTY OF LAKE SS:
Before me, the undersigned, a notary Public in and for said County and State, this 14 day of September, 2006
personally appeared: Dorothy Sorensen acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto
subscribed my name and affixed my official seal.
My commission expires: April 3, 2009 Signature
Resident of Porter County Printed Theodore A. Fitzgerald Notary Public
I affirm, under the penalties for perjury, that I have taken reasonable care to reduct each Social Security
number in this document, unless required by law.
MAIL TO: Theodore A. Fitzgerald, PO Box 98, Hebron, IN 46341

This instrument was prepared by: Theodore A. Fitzgerald (6903-64), PO Box 98, Hebron, IN 46341

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