STATE FOR LITERALA LALE COLLECTOR FILED FOR FORDER

2006 113263

2011 TO BE FOR 12: 10 - NECES HELD TO OWN FOR DAUGE

A298-10 R298-04

QUITCLAIM DEED

| THIS QUITCLAIM DEED, Executed this 27 day of Det ember, (year), 200 | Ç |
|--|---|
| by first party, Grantor, Potricia A Phillips AKA Patricia Philips | |
| whose post office address is 343 Clareland 157.18 | |
| to second party, Grantee, Crogory PFMckrolley This Document is the property of whose post office address is the Roske & Jobby Remarks, IN H6409 | |
| whose post office address is the Blee & Listy Round, IN H6409 | |
| WITNESSETH, That the said first party, for good consideration and for the sum of | |
| Forty thousand dollars Dollars (\$ 40,000) 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 IN, to wit: If I # 441-183-6 Lot 6 in Block 31 in Eary Land Company's Fourth Subdivisor in the City of Eary, 9s per. plat, there of recorded in Plat Book 14 page 15, in the office of the Recorder of Lake County, | |
| Fourth Subdivisor, in the City of Gary, as per. | |
| plat, there of recorded in PLAT Book 14 page 15, | |
| In the office of the Recorder of Lake County | |
| Indiana. | |
| | |
| | |

(1)

If your state requires 8 ½" x 11" forms, cut off the bottom of this page at the dotted line.

AKHH

OULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

DEC 272006

PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR 185

Rev. 6/98

026311



© E-Z Legal Forms. Before you use this form, read it, fill in all blanks, and make whatever changes are necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. E-Z Legal Forms and the retailer make no representation or warranty, express or implied, with respect to the merchantability of this form for an intended use or purpose.

| IN WITNESS WHEREOF, The said first party has signed written. Signed, sealed and delivered in presence of: | and sealed these presents the day and year first above | | |
|---|---|--|--|
| | Pt. 1 DI | | |
| Signature of Witness | Signature of First Party | | |
| | Action A Abillion | | |
| Print name of Witness | Patricia A Phillips Print name of First Party Print name of First Party | | |
| Signature of Witness | Signature of First Party | | |
| Print name of Witness | Print name of First Party | | |
| State of INDIANA } County of IAKE On DECEMBER 27, 2000 before me, BALBAL | A. T. Partell | | |
| appeared PATRICA A PHILLIPS | , s. Bother, | | |
| personally known to me (or proved to me on the basis of sa is/are subscribed to the within instrument and acknowle his/her/their authorized capacity(ies), and that by his/her/thentity upon behalf of which the person(s) acted, executed the WITNESS my hand and official seal. | edged to me that he/she/they executed the same in eir signature(s) on the instrument the person(s), or the e instrument. | | |
| Bashus Bastilis | | | |
| Signature of Notacy | Affiant Known K Produced ID | | |
| organism of Atomor | Type of ID DRIVERS LICENSE | | |
| State of County of On before me, | BARBARA J. BORTOLI Notary Public, State of Indiana County of Lake My Commission Expires 05/19/2008 | | |
| appeared personally known to me (or proved to me on the basis of sa | tisfactory evidence) to be the person(s) whose name(s) | | |
| 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. | | | |
| SEAL WOLAND | ALLE STATE OF THE | | |
| Signature of Notary | AffiantKnownProduced ID | | |
| THE FOR | Type of ID(Seal) | | |
| "I AFFIRM, THE PENALTIES FOR | | | |
| PERJURY. THAT I HAVE TAKEN THE PERJURY. THAT I HAVE TAKEN THE PACH SOCIAL ABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW." PREPARED BY: PATRICIA | Signature of Preparer | | |
| PREPARED BY: Patricia | 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. | | |