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CLERK OF SUPERIOR COURT
LAKE COUNTY
FIDELITY & BOND

2008 004399

2008 JAN 17 PM 3:23

MICHAEL J. 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: JANUARY 17, 2008

Reference Number of Any Related Documents: N/A

Grantor:

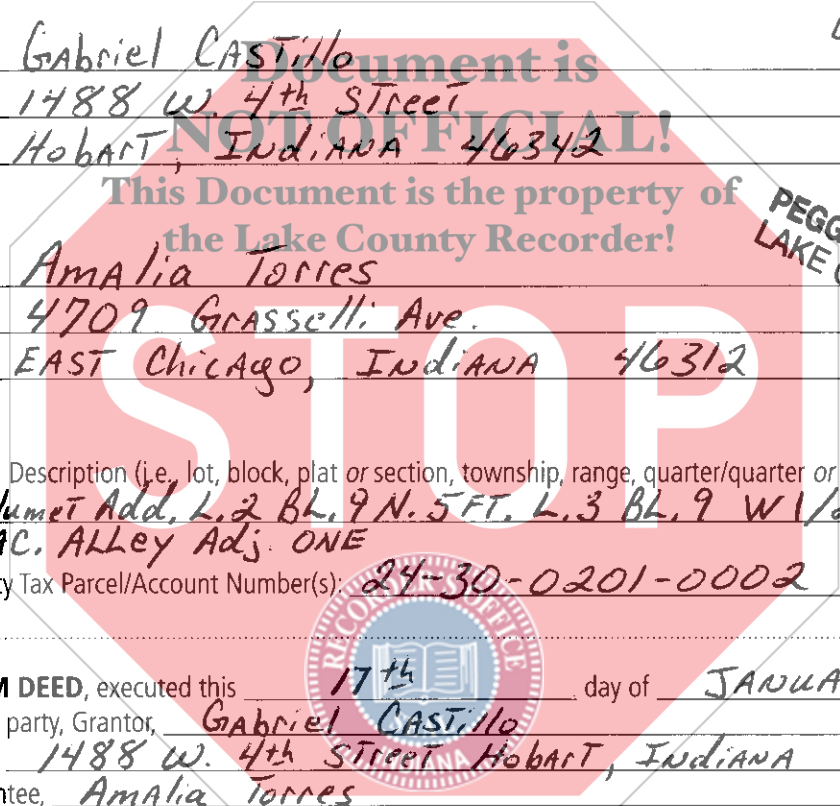
Name Gabriel CASTILLO
Street Address 1488 W. 4th Street
City/State/Zip HOBART, INDIANA 46342



Grantee:

Name Amalia TORRES
Street Address 4709 Grasselli Ave.
City/State/Zip EAST CHICAGO, INDIANA 46312

TAXES:



DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

JAN 17 2008

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Calumet Add. L.2 BL. 9 N. 5 FT. L.3 BL. 9 W 1/2
VAC. ALLEY Adj. ONE

Assessor's Property Tax Parcel/Account Number(s): 24-30-0201-0002

THIS QUITCLAIM DEED, executed this 17th day of JANUARY, 2008, by first party, Grantor, Gabriel CASTILLO, whose mailing address is 1488 W. 4th Street HOBART, INDIANA 46342, to second party, Grantee, Amalia TORRES, whose mailing address is 4709 Grasselli Ave. EAST CHICAGO, IN. 46312

WITNESSETH that the said first party, for good consideration and for the sum of ONE DOLLAR Dollars (\$ 1.00) 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,

3187

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CS
A

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: SECTION & PLAT 28 Routing # 2 I30-201
CALUMET ADD. L. 2 BL. 9 N. 5 FT. L. 3 BL. 9 W 1/2
VAC. ALLEY Adj. ON E.
Commonly Know AS: 4709 Grasselli E. Chicago, IN. 46312

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 Witness Herminia Castillo
Print Name of Witness HERMINIA CASTILLO

Signature of Witness _____
Print Name of Witness _____

Signature of Grantor Gabriel Castillo
Print Name of Grantor GABRIEL CASTILLO

State of INDIANA
County of LAKE

On January 17th - 08, before me, Evelyn Clark,
appeared Gabriel + HERMINIA CASTILLO, 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.
Evelyn Clark
Signature of Notary

"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: Gabriel Castillo

Affiant Known Produced ID
Type of ID _____
(Seal)





AMEND OPERATOR DRIVER LICENSE

INDIANA



Will D. Bell

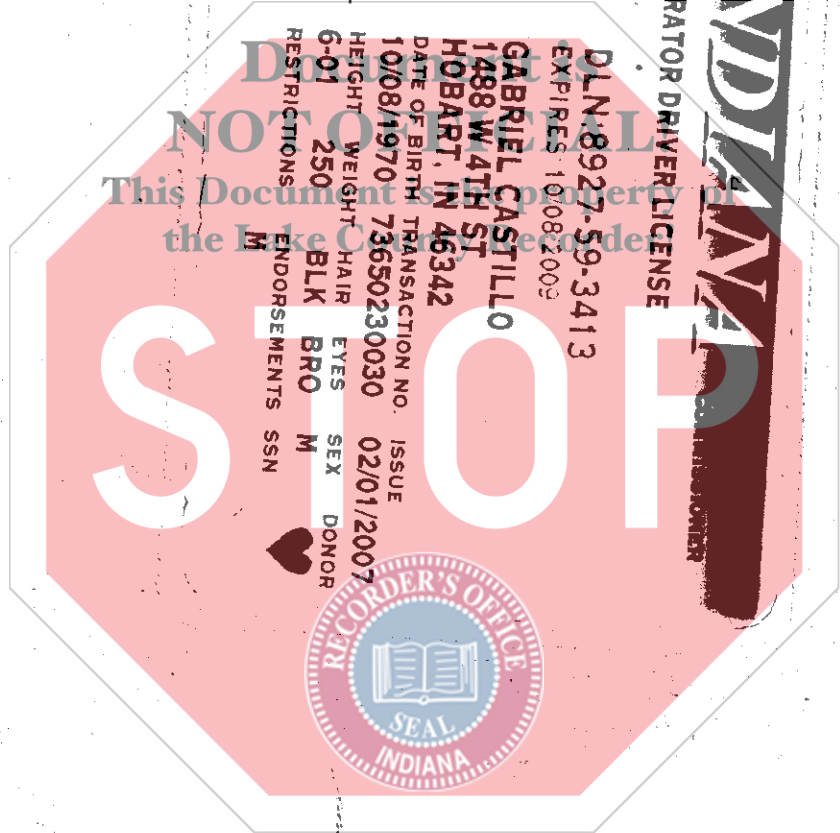
DLN: 8927-59-3413
EXPIRES: 10082009

GABRIEL CASTILLO
1488 W 4TH ST
HOBART, IN 46342

DATE OF BIRTH: 10/08/1970
TRANSACTION NO.: 73650230030
ISSUE: 02/01/2007

HEIGHT: 6-01
WEIGHT: 250
HAIR: BLK
EYES: BRO
SEX: M
DONOR:

RESTRICTIONS: M
ENDORSEMENTS: SSN



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