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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

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2008 MAR 11 PH 1:18

MICHAEL A. BROWN  
RECORDER

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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: 3-11-08

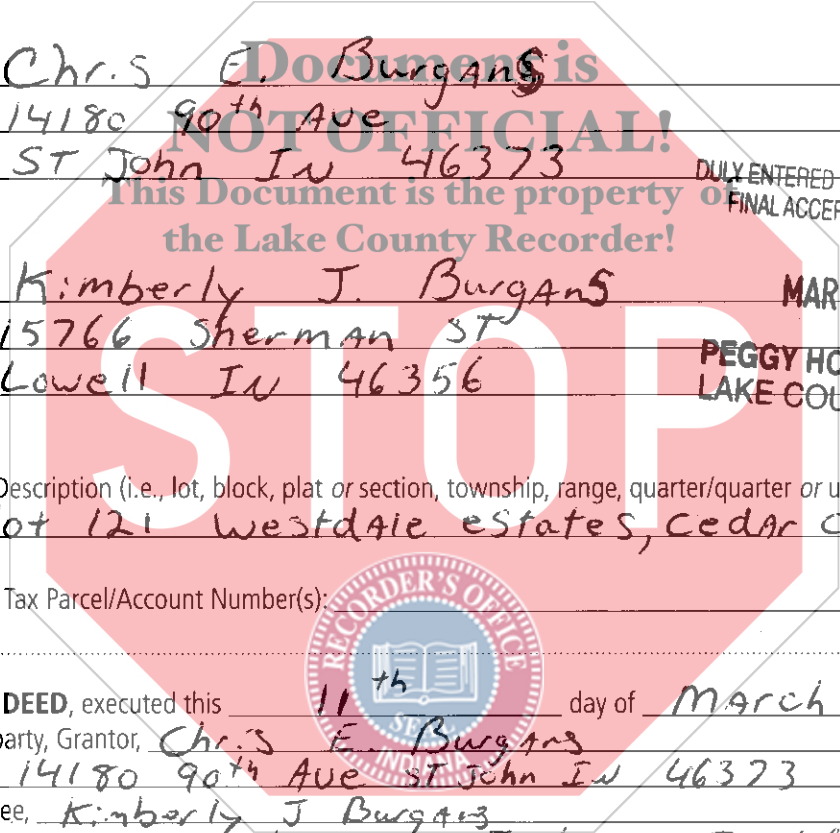
Reference Number of Any Related Documents: \_\_\_\_\_

Grantor:

Name Chris E. Burgans  
Street Address 14180 90th Ave  
City/State/Zip ST John IN 46373

Grantee:

Name Kimberly J. Burgans  
Street Address 15766 Sherman St  
City/State/Zip Lowell IN 46356



Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): lot 121 Westdale estates, Cedar Creek township

Assessor's Property Tax Parcel/Account Number(s): \_\_\_\_\_

**THIS QUITCLAIM DEED**, executed this 11<sup>th</sup> day of March, 2008, by first party, Grantor, Chris E. Burgans, whose mailing address is 14180 90th Ave ST John IN 46373, to second party, Grantee, Kimberly J. Burgans, whose mailing address is 15766 Sherman St Lowell IN 46356.

**WITNESSETH** that the said first party, for good consideration and for the sum of Ten Dollars (\$ 10.00 ) 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,

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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: lot 121 westdale estates unit 1

Common Address of 15766 Sherman St Lowell IN 46356

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 Misty Watland  
Print Name of Witness Misty Watland

Signature of Witness Kellie Will  
Print Name of Witness Kellie Williamson

Signature of Grantor Chris E. Burgans  
Print Name of Grantor Chris E. Burgans

State of Indiana  
County of Lake

On March 11th before me, Chris Burgans appeared Before me 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 Drivers license  
(Seal)



"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: CL



**INDIANA**

OPERATOR DRIVER LICENSE



DLN: 8908-26-8902  
EXPIRES: 09/04/2009

**CHRIS E BURGANS**  
15766 SHERMAN ST  
LOWELL, IN 46356

DATE OF BIRTH	TRANSACTION NO.	ISSUE		
09/04/1964	53360200018	10/11/2009		
HEIGHT	WEIGHT	HAIR	EYES	SEX
5-08	170	BLO	BLU	M
RESTRICTIONS	ENDORSEMENTS	SSN		
	M			

