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THE PURE A THE ED FOR RECORD

MICHAEL A. BROWN RECORDER

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 6th day of September, 2608 (year),

by first party, Grantor, Thomas Kelly whose post office address is 514 East 46th Avenue/Gary, Indiana 46409 to second party, Grantee, Rayward Robinson whose post office address is 5350 Medison Street Merrillville Indiana 46410

This Document is the property of the Lake County ROULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

SEP 0 9 2008

WITNESSETH, That the said first party, for good constderation and for ANDITION

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 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 Ludiana to wit:

514 East 46th Avenue/Gary, Indiana 46409 Commouly KNOWN AS 8

Legal Description: 5.135 FT OF W1/3RD OF E. 1/4 OF S1/2 NE NW. 5.34 T.36 R.8 .135AC \$18

Parcel Number: 45-08-34-126-014.000-004

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	$\lambda \rho$
Signature of Witness	- Shomas Kelly
organizate of Williams	Signature of First Party
Print name of Witness	Thomas Kelly
Time name of withess	Print name of First Party
Signature of Witness	Signature of First Party
Print name of Witness	Print name of First Party
State of Indiana	a series mand of I hot I mity
County of Lake	
On September 1, 2008 before me. A.	though Goffer
On September 6, 2008 before me, Auappeared Thomas Kelly/	TONG GOTTE
personally known to me (or proved to me on the	basis of satisfactory evidence) to be the person(a)
whose name(s) is/are subscribed to the within in	Istriment and acknowledged to me that ha/sha/kha
executed the same in his/her/their authorized car	pacity(ies), and that by his/her/their signature(s) on
histuined the person(s) or the entity upon beha	alf of which the person(s) acted, executed the instru
WILLESS my hand and official seal	SEAL
Harris Doc	Notary Public, State of Indiana County of Lake
Signature of Notary	My Commission Expires July 12, 2013
Signature of Rotal	JEEC CLALL
This Decree	ITOULC
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State of	
County of	
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instrument the person(s) or the entity upon beha	acity(ies), and that by his/her/their signature(s) on the of which the person(s) acted, executed the instrumental forms of the control of the
WITNESS my hand and official seal.	in of which the person(s) acted, executed the instrum
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	Type of ID
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BLE CARE TO REDACT EACH SOCIAL BLE CHRITY NUMBER IN THIS DOCUMENT.	Signature of Preparer
ERJURY, THAT I HAVE TAKEN HEASON	Signature of Preparer Print Name of Preparer

