2009 025091

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 APR 20 PH 3: 21

MICHAEL A. BROWN RECORDER

Recording requested by:	
When recorded, mail to: JAMES A. LEWIS	
Name: 12357 S. ASHLAND AVE. T-12	Space above reserved for use by Recorder's Office
Address:	Document prepared by: Name JAMES E. LEWIS
City: <u>Calumet Park</u> State/Zip: Illinois, 60827	Address 7353 S Eberhart Ave.
State/Zip:, 00027	
	City/State/Zip Chicago, IL. 60619
Property Tax Parcel/Account Number: Property Number: 45-07-13-427-011. Old Property Number: 41-49-0367-00	m Deed FICIAL!
This Quitclaim Deed is made on April 20th, JAMES E. LEWIS aka James (2003), Granto	, between Ave
, City of Chicago JEL,	, State of Illinois ,
	intee, of 12357 S. Ashland Ave.
, City of Calumet Park	_, State ofIllinois
For valuable consideration, the Grantor hereby quitele	
the Grantor in the following described real estate and	11000
and assigns, to have and hold forever, located at 48	
, City of Gary	State of Indiana DULY ENTERED FOR TAXATION SUBJECT TO
Legal Description: OAK TERRACE LOT	FINAL ACCEPTANCE FOR TRANSFER
Real AND	APR 2 0 2009
	PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR
Subject to all easements, rights of way, protective cov	venants, and mineral reservations of record, if any.
Taxes for the tax year of shall be prorate	ed between the Grantor and Grantee as of the date of
recording of this deed.	*NOVA Quitclaim Deed Pg.1 (01-09) 002945
	002945
	i de la companya de

Dated: April 20th, 2009	
Jan Lei	
James E. Lewis	
Name of Grantor	
Signature of Witness #1	Printed Name of Witness #1
Signature of Witness #2 NOT This Docum	Printed Name of Witness #2 OFFICIAL! ent is the property of
State of NOIANAthe Lake	County of ReLAKE, , the Grantor, TAMES E. LEWIS,
	worn, did state and prove that he/she is the person described
in the above document and that he/she signed	the above document in my presence.
Notary Signature	OFFICIAL SEAL VERNON RICHARDS NOTARY PUBLIC - INDIANA LAKE COUNTY
	My Comm Expires 10/18/15
Notary Public,	WOLANA STATES TO A STATE OF THE STATES OF TH
In and for the County of	State of $\int NC(1)NA$
My commission expires: (0)	20 0 5 Seal
Send all tax statements to Grantee. "I AFFIRM, UND	ER THE PENALTIES FOH I HAVE TAKEN REASON-
ABLE CARE TO	REDACT EACH SOCIAL BER IN THIS DOCUMENT, **NOVA Quitclaim Deed Pg.2 (01-09)

INLESS REQUIRED BY LAW."