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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2009 029818

2009 MAY -6 PM 3:24

MICHAEL A. BROWN  
RECORDER

Recording requested by: \_\_\_\_\_  
When recorded, mail to: \_\_\_\_\_

Name: Garfield Dickson  
Address: 667 W. 39<sup>th</sup> Ave  
City: GARY  
State/Zip: Indiana, 46408

Space above reserved for use by Recorder's Office

Document prepared by:  
Name Angela & Garfield Dickson  
Address 667 W. 39<sup>th</sup> ave.  
City/State/Zip GARY, IN 46408

Property Tax Parcel/Account Number:

### Quitclaim Deed

**NOT OFFICIAL!**

This Quitclaim Deed is made on MAY 5, 2009, between

Angela D. Dickson, Grantor, of 667 W. 39<sup>th</sup> Ave,  
City of GARY, State of Indiana

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

and Garfield Dickson, Grantee, of 667 W. 39<sup>th</sup> Ave,  
City of GARY, State of Indiana

MAY 06 2009

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

For valuable consideration, the Grantor hereby quitclaims and transfers all right, title, and interest held by the Grantor in the following described real estate and improvements to the Grantee, and his or her heirs and assigns, to have and hold forever, located at 2401 Lincoln st,  
City of GARY, State of Indiana **009313**

LOT 48 (FORTY-EIGHT) IN BLOCK FIVE (5), GARY PARK ADDITION TO THE CITY OF GARY, COMMONLY KNOWN AS 2401 LINCOLN STREET, LAKE COUNTY, INDIANA

Subject to all easements, rights of way, protective covenants, and mineral reservations of record, if any.  
Taxes for the tax year of 2009 shall be prorated between the Grantor and Grantee as of the date of recording of this deed.

18<sup>00</sup>  
CS

Rm

Dated: 5/6/09

[Handwritten Signature]  
Signature of Grantor

Angela D. Hargro - Dickson  
Name of Grantor

Signature of Witness #1

Printed Name of Witness #1

Signature of Witness #2

Printed Name of Witness #2

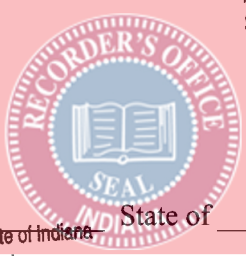
State of Indiana County of Lake  
On May 6, 2009, the Grantor, Angela Dickson,

personally came before me and, being duly sworn, 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.

[Handwritten Signature]  
Notary Signature

"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: [Handwritten Signature]

Notary Public,  
In and for the County of Lake State of Indiana  
My commission expires: September 20, 2010



Seal

Send all tax statements to Grantee.