

QUITCLAIM DEED

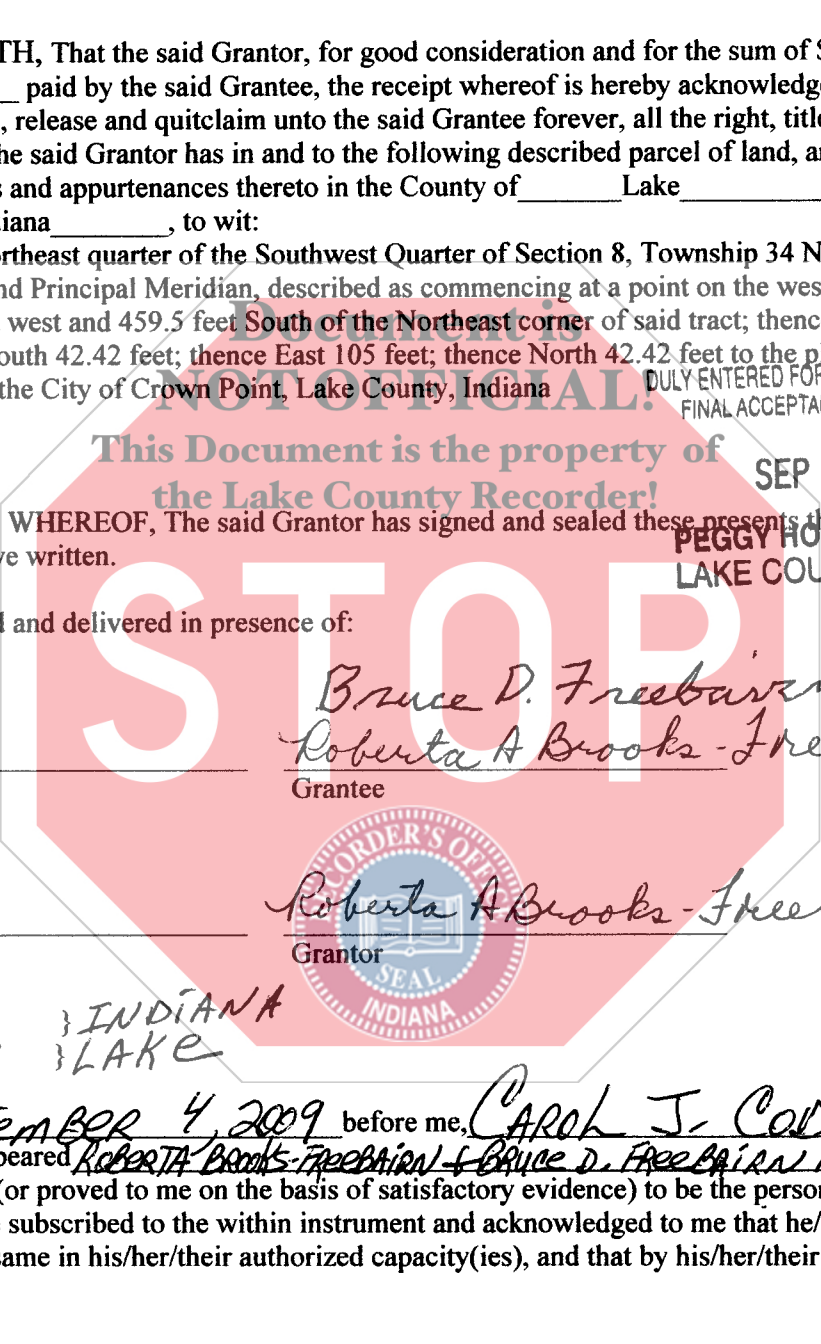
THIS QUITCLAIM DEED, Executed this 4th day of September, 2009, by the Grantor, Roberta A Valsi AK/A Roberta A. Brooks-Freebairn whose mailing address is 435 S. Main St. Crown Point, Indiana to the Grantee, Roberta A. Brooks-Freebairn and Bruce D. Freebairn husband and wife whose mailing address is 435 S. Main St. Crown Point, Indiana 46307 45-16-08-330-022.000-042

2009 061384

WITNESSETH, That the said Grantor, for good consideration and for the sum of \$ 11.00 paid by the said Grantee, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said Grantee forever, all the right, title, interest and claim which the said Grantor 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: Part of the Northeast quarter of the Southwest Quarter of Section 8, Township 34 North, Range West of the 2nd Principal Meridian, described as commencing at a point on the west line of Main Street, 50 feet west and 459.5 feet South of the Northeast corner of said tract; thence West 105 feet; thence South 42.42 feet; thence East 105 feet; thence North 42.42 feet to the place of the beginning, in the City of Crown Point, Lake County, Indiana

2009 SEP -4 PM 2:59

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD



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SEP 04 2009

IN WITNESS WHEREOF, The said Grantor has signed and sealed these presents the day and year first above written. PEGGY HOLINGA RATONA LAKE COUNTY AUDITOR

Signed, sealed and delivered in presence of:

Bruce D. Freebairn
Roberta A Brooks-Freebairn
Grantor

Witness

Roberta A Brooks-Freebairn
Grantor

Witness

STATE OF INDIANA
COUNTY OF LAKE

On September 4, 2009 before me, Carol J. Cody personally appeared Roberta Brooks-Freebairn & Bruce D. Freebairn 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)

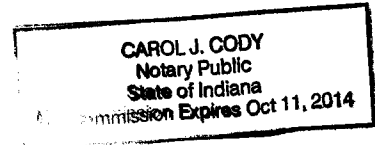
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CS
RM

015333

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.

Carol J. Cody
Signature



Affiant: Known Unknown

ID Produced: 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:

Roberta A. Brooks-Freeman

NOT OFFICIAL!

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STOP

