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2009 082137

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2009 DEC 11 AM 9:14

MICHAEL A. BROWN
RECORDER

Recording requested by: Lisa Kaminsky
When recorded, mail to:
Name: Lisa Kaminsky
Address: 8304 Kraay Avenue
City: Munster
State/Zip: Indiana, 46321

Space above reserved for use by Recorder's Office
Document prepared by:
Name: Theresa Ferr
Address: 8963 E 124th Place
City/State/Zip: CROWN POINT, IN 46307

Property Tax Parcel/Account Number:

45 07 19 278 021.000 027

Quitclaim Deed

NOT OFFICIAL!

This Quitclaim Deed is made on December 11, 2009, between
Della Sue Gajewski Grantor, of 8304 Kraay Avenue
, City of Munster, State of Indiana,
and Lisa Marie Kaminsky, Grantee, of 8304 Kraay Avenue
, City of Munster, State of Indiana.

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 8304 Kraay
, City of Munster, State of Indiana:

Lot 16, in block 2, in Kraay's Ridgeway Addition to the town of Munster, as per plat thereof, recorded in Plat Book 24, Page 24, in the office of the recorder of Lake County, Indiana

Subject to all easements, rights of way, protective covenants, and other 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.

DEC 11 2009

★NOVA Quitclaim Deed Pg.1 (01-09)

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

014421

18⁰⁰
CS
RM

Dated: December 11, 2009

Della Sue Gajewski
Signature of Grantor

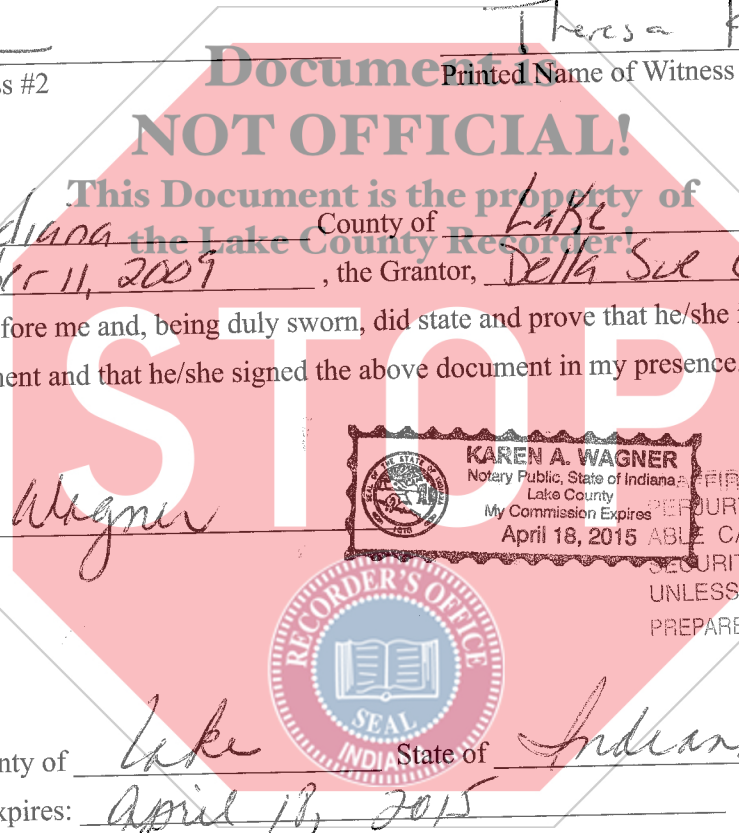
Della Sue Gajewski
Name of Grantor

Thomas J Gajewski
Signature of Witness #1

Thomas John Gajewski
Printed Name of Witness #1

[Signature]
Signature of Witness #2

Theresa Kerr
Printed Name of Witness #2



State of Indiana County of Lake
On December 11, 2009, the Grantor, Della Sue Gajewski,

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.

Karen A Wagner
Notary Signature



PREPARED BY: [Signature]
I HEREBY CERTIFY, UNDER THE PENALTIES FOR PERJURY, THAT I HAVE TAKEN REASONABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW.

Notary Public,
In and for the County of Lake State of Indiana
My commission expires: April 18, 2015 Seal

Send all tax statements to Grantee.