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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2009 082324

2009 DEC 11 PM 1:42

MICHAEL A. BROWN  
RECORDER

Recording requested by: CRYSTAL JONES  
When recorded, mail to:

Name: CRYSTAL JONES  
Address: P.O. BOX 2263  
City: GARY  
State/Zip: INDIANA 46409

Space above reserved for use by Recorder's Office

Document prepared by:  
Name BOBBIE SCOTT  
Address P.O. BOX 4373  
City/State/Zip GARY, INDIANA 46404

Property Tax Parcel/Account Number: 45-08-27-252-024-000-004

### Quitclaim Deed

**NOT OFFICIAL!**

This Quitclaim Deed is made on October 8, 2009, between  
BOBBIE SCOTT, Grantor, of 3954 VERMONT STREET  
GARY, City of GARY, State of INDIANA,  
and CRYSTAL JONES, Grantee, of 3954 VERMONT STREET  
GARY, City of GARY, 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 3954 VERMONT STREET, City of GARY, State of INDIANA:

EASTOVER ALL L-18 BL-2 S-24 FT. L-17 BL-2

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

DEC 11 2009 18<sup>00</sup>

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.

REGINA KATONA  
LAKE COUNTY AUDITOR

021594

★NOVA Quitclaim Deed Pg.1 (01-09)

Dated: October 8, 2009

Bobbie Scott  
Signature of Grantor

Bobbie Scott  
Name of Grantor

[Signature]  
Signature of Witness #1

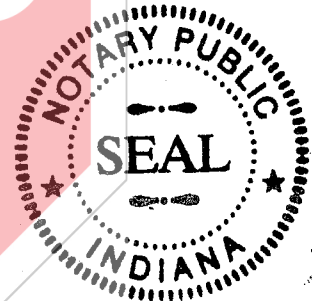
Carmelita V. Perry  
Printed Name of Witness #1

[Signature]  
Signature of Witness #2

Valerie J. Broadnax  
Printed Name of Witness #2

This Document is the property of  
State of Indiana County of Lake  
On Dec 10, 2009, the Grantor, Bobbie Scott,  
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.

[Signature]  
Notary Signature



Notary Public,  
In and for the County of Lake State of Indiana  
My commission expires: 6/30/2017 Seal

Send all tax statements to Grantee.

"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: Bobbie Scott