

2

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2010 012503

2010 MAR -8 PM 3:18

MICHELLE R. FAJMAN
RECORDER

Above Space Reserved for Recording

If required by your jurisdiction, list above the name & address of: 1) where to return this form, 2) preparer, 3) party requesting recording.

Quitclaim Deed

Date of this Document: _____

Reference Number of Any Related Documents: _____

Grantor:

Name CECIL HODGES
Street Address P O BOX 4365
City/State/Zip GARY, IN 46404

Grantee:

Name JENETTE MCKNIGHT
Street Address 1965 ELLSWORTH ST
City/State/Zip GARY, IN 46404

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name) 45 08 28 432 025.000 004 -REISSIG'S ADD. GLEN PARK S. 16 2/3FT. L.31 BL.6 N. 16 2/3 FT. L.32 BL.6

Assessor's Property Tax Parcel/Account Number(s) 45 08 28 432 025.000 004

THIS QUITCLAIM DEED, executed this 10 day of MARCH 2010 by first party, grantor, CECIL HODGES SR. whose mailing address is P O BOX 4365 - GARY, IN 46404 to second party, Grantee, JENETTE MCKNIGHT whose mailing address is 1965 ELLSWORTH ST - GARY, IN 46404

WITNESSETH that the said first party, for good consideration and for the sum of TEN DOLLARS Dollars (\$10.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim.

www.aaxipm.com

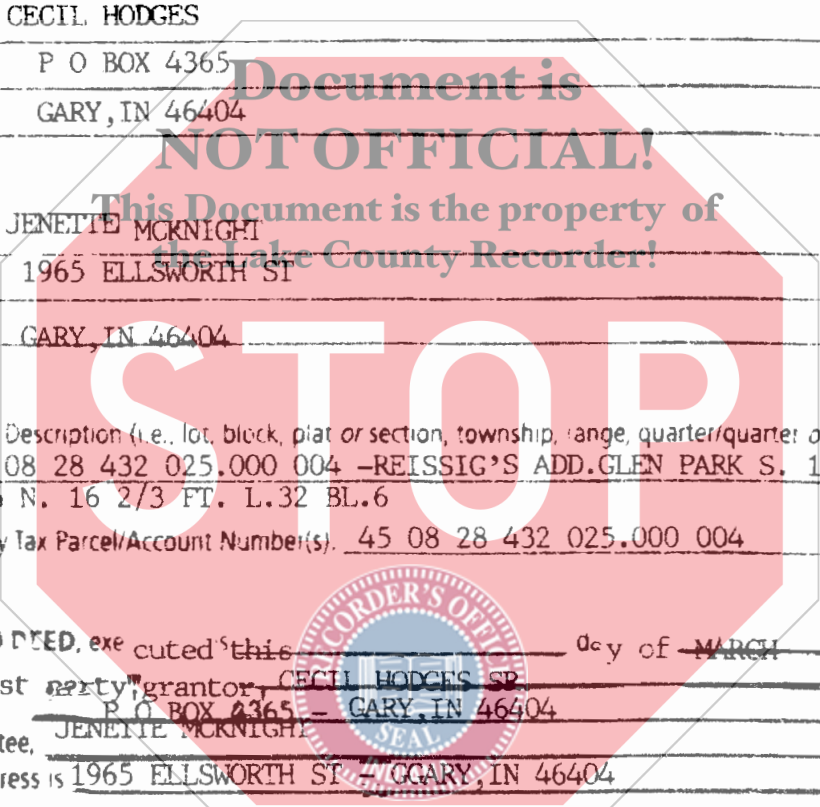
Page 1 of 2 DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

© 2005 DocuSign Media, LLC
J.208-1 Rev. 05/05

MAR 08 2010

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

051311



→

180
CS
RM

which the said first party has in mind to the following described parcel of land and improvements and appurtenances thereto in the County of LAKE State of INDIANA to wit, REISSIG'S ADD. GLEN PARK S. 16 2/3 FT. L. 31 BL. 6 N. 16 2/3 FT. L. 32 BL. 6

IN WITNESS WHEREOF the said first party has signed and sealed these presents the day and year first written above. Signed, sealed and delivered in the presence of

Signature of Witness [Signature]
Print Name of Witness David King
Signature of Witness [Signature]
Print Name of Witness Renee A. Long
Signature of Grantor [Signature]
Print Name of Grantor CECIL HODGES SR

State of INDIANA
County of LAKE

On March 8, 2010 before me Maquie Addison 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) 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
[Signature]
Signature of Notary My Com Exp 5-31-2017

Affiant: Known Produced ID
Type of ID Indiana Sure
(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: C.D.H.

