THE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2010 015347

2018 MAR 17 AH 10: 04

MICHELLE HAJMAN RECORDER

Recording requested by:	Space above reserved for use by Recorder's Office
When recorded, mail to: Grante Address	Document prepared by:
Name: Robert M. Howe	Name Robert M. Howe
Address: 8683 Sherman St.	Address 8683 Sherman St.
City/ State/Zip: Crown Point, IN 46307	City/State/Zip Crown Point, IN 46307
Property Tax Parcel/Account Number: 45-17-31-2	00-009.000-044
Ouite	claim Deed
2406	
NOTO	DFFICIAL!
This Quitclaim Deed is made on March 16, 20	10 , between Robert Howe and Dana Howe ,
Grantor, of Lake County	, City of Crown Point , State of
Indiana , and Robert M. Howe	, Grantee, of Lake County
City of Crown Point , State	e of <u>Indiana</u> .
For valuable consideration, the Grantor hereby	quitclaims and transfers all right, title, and interest held by
	te and improvements to the Grantee, and his or her heirs
and assigns, to have and hold forever, located a	t 8683 Sherman St.
City of Crown Point , Sta	ate of Indiana :
	WDER'S O
The Office Of The Recorder Of Lake County,	Per Plat Thereof, Recorded In Plat Book 76 Page 4 In
ones of the resolution of Lane county,	
	SEAL
	ve covenants, and mineral reservations of the data of TPANS
	FINAL AS FOR TAY IT
Subject to all easements, rights of way, protecti	ve covenants, and mineral reservations of Ferginal Williams vs.
Taxes for the tax year of 2009 shall be prorated	d between the Grantor and Grantee as of the date of re-
cording of this deed.	ve covenants, and mineral reservations of the date of regards of the date of regards. PEGGY HO.
	PEGGY HOLINGA KATON
	ANOVA GUILLANTO GES MA PON
05	14.4.3

051473

Dated: _ < / /(/ 2010
Eignature of Grantor
Signature of Grantor Robert M. Howe Danie M. Howel Name of Grantor
Document is Signature of Witness #1 Signature of Witness #1
This Document is the property of and land Lake County Racondar! HARRISON
Signature of Witness #2 Printed Name of Witness #2
State of Indiana County of Lake On 3/14/2010, the Grantor, Robert & Dang Howe,
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.
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."
Notary Public, In and for the County of State of Malance TRACEY TIGNER
My commission expires: 3/36/3017
Send all tax statements to Grantee. **NOVA Quitclaim Deed Pg.2 (07-09)