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2010 042683

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2010 JUL 22 PM 3:02

MICHELLE B. FAJMAN
RECORDER

Recording requested by: _____

Space above reserved for use by Recorder's Office

When recorded, mail to:

Document prepared by:

Name: ROBERT SCHUSTER

Name MARY ANN SAWYER

Address: 1018 S. 14TH ST.

Address 517 S. LAWRENCE ST.

City/State/Zip: CHESTERTON, IN 46304

City/State/Zip HOBART, IN 46342

Property Tax Parcel/Account Number: 25-42-0288-0008

45-09-06-431-006,000-004

Quitclaim Deed

This Quitclaim Deed is made on July 21 2010, between
AKA MARY SAWYER
MARY ANN SAWYER, Grantor, of LAKE CO. 517 S. LAWRENCE ST.
_____, City of HOBART, State of INDIANA,
and ROBERT SCHUSTER, Grantee, of PORTER CO. 1018 S. 14TH ST
_____, City of CHESTERTON, 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 606 S. HOWARD STREET
LAKE CO., City of GARY, State of INDIANA:

W.A. Ewing's Sub. Miller Station S. 46ft. Of N. 217.07ft. Of Lots 6&7
Block 10 46x100ft.

Commonly known as 606 Howard Street, Gary, Indiana 46403

DOCUMENT ENTERED FOR RECORD
FINAL ACCEPTANCE FOR TRANSFER

JUL 22 2010

Subject to all easements, rights of way, protective covenants, and mineral reservations of record, if any.

Taxes for the tax year of _____ shall be prorated between the Grantor and Grantee as of the date of recording of this deed.

★NOVA Quitclaim Deed Pg.1 (07-09)

003021

18w
CS
Rn

Dated: July 21, 2010

Mary Ann Sawyer
Signature of Grantor

MARY ANN SAWYER
Name of Grantor

Signature of Witness #1

Printed Name of Witness #1

Signature of Witness #2

Printed Name of Witness #2

State of Indiana County of Porter

On July 21, 2010, the Grantor, Mary Ann Sawyer, 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.

Gina L O'Brien
Notary Signature

Notary Public,
In and for the County of Porter State of Indiana
My commission expires: June 9, 2018 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: mas



★NOVA Quitclaim Deed Pg.2 (07-09)