

2010 072249

2010 DEC -7 PM 3:03

MAIL ROOM

MAIL TAX BILL TO: 8531 Judith Lane, Saint John, Indiana 46373 "GRANTEE"

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 6th day of December, 2010.

By first party, Grantors, **JON C. LILLY and AGNES T. LILLY**

Whose post office address is 8531 Judith Lane, Saint John, Indiana 46373

To second party, Grantee **AGNES T. LILLY**

Whose post office address is 8531 Judith Lane, Saint John, Indiana 46373

WITNESSETH, That the said first party, for good consideration and for the sum of PAID IN FULL 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, of land, and improvements and appurtenances thereto in the County of Lake, State of Indiana to wit:

Lot 69, Ventura Estates Unit 3, as shown in Plat Book 56, page 34, in the Office of the Recorder of Lake County, Indiana

COMMONLY KNOWN AS: 8531 JUDITH LANE, SAINT JOHN, INDIANA 46373

PARCEL NUMBER: 45-11-29-203-003.000-035

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

Jon C Lilly
Signature of First Party

JON C. LILLY
Print Name of First Party

Agnes T. Lilly
Signature of First Party

AGNES T. LILLY
Print Name of First Party

Agnes T. Lilly
Signature of Second Party

AGNES T. LILLY
Signature of Second Party

DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER

DEC 07 2010

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PEGGY HULINGA KATONA
LAKE COUNTY AUDITOR

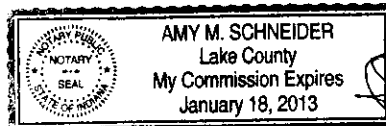
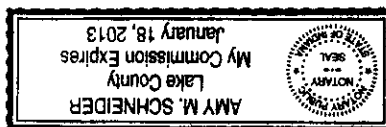
CS
18⁰⁰
PB

STATE OF INDIANA)
) SS: Indiana
COUNTY OF LAKE) Lake

On 6th day of December, 20 Before me, Appeared Agnes Lilly
Personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacity(ies), and that by her signature(s) on the instrument the person(s) on the instrument the person(s), or the entity upon behalf of which the person(s) which the person(s) acted, executed the instrument.

Amy M. Schneider
Signature of Notary

My County of Residence: Lake
My Commission Expires: 01/18/13



AGNES LILLY HAS BEEN ADVISED THAT IT IS HER RESPONSIBILITY TO OBTAIN LIFE, ACCIDENT AND DISABILITY INSURANCE TO PROTECT HER SOCIAL SECURITY NUMBER ON THIS INSTRUMENT. UNLESS SHE OBTAINS SUCH INSURANCE.

Agnes Lilly

*This instrument prepared by: William Joseph O'Connor, Attorney at Law
5268 Hohman Avenue, Hammond, Indiana 46320
Telephone (219) 937-0500*