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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2010 073749

2010 DEC 14 AM 11:19

MICHAEL S. STAJMAN  
RECORDER

Recording requested by: JASON NOWICKI

Space above reserved for use by Recorder's Office

When recorded, mail to:

Document prepared by:

Name: JASON & TIFFANY NOWICKI

Name JASON NOWICKI

Address: 9955 GETTLER ST

Address 9955 GETTLER ST

City/State/Zip: DYER, IN 46311

City/State/Zip DYER, IN 46311

Property Tax Parcel/Account Number: 45-10-36-353-016.000-032

### Quitclaim Deed

This Quitclaim Deed is made on DECEMBER 14, 2010, between JASON NOWICKI, Grantor, of 9955 GETTLER ST, City of DYER, State of INDIANA, and JASON & TIFFANY NOWICKI (H&W), Grantee, of 9955 GETTLER ST, City of DYER, 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 9955 GETTLER ST, City of DYER, State of INDIANA:

THE EAST 26.2 FEET OF THE WEST 90.93 FEET OF LOT 189, IN PRAIRIE TRAILS PHASE 1, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 93, PAGE 48, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.  
Subject to all easements, rights of way, protective covenants, and mineral reservations of record, if any.

Taxes for the tax year of 2010 shall be prorated between the Grantor and Grantee as of the date of recording of this deed.

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

Cash 1800  
BB

DEC 14 2010

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

★NOVA Quitclaim Deed Pg.1 (07-09)

005348

Dated: 12/14/10

[Signature]  
Signature of Grantor

JASON NOWICKI  
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 Lake

On December 14, 2010, the Grantor, Jason Nowicki, 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

"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: [Signature]

Notary Public,

In and for the County of Lake State of Ind.

My commission expires: May 21, 2017 Seal

Send all tax statements to Grantee.

