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STATE OF INDIANA LAME COUNTY FILED FOR RECORD

2011 MAY 17 AM 11: 52

MICHEL FAUNAN RECONDER

Recording requested by: When recorded, mail to:	
Name: Barbara LaBroi	Space above reserved for use by Recorder's Office
Address: PO Box 435	_ Document prepared by:
City: Schererville	_ Name Barbara Johnson -LaBroi
State/Zip: In. 46375	Address Po Box 435
	City/State/Zip Schererville, In 46375
Property Tax Parcel/Account Number: 45-05-32-1	
	TCLAIM DEED
This Quitclaim Deed is made on September 29, 20	between , between
Barbara Johnson	irantor, of 1575 Arthur Place
City of Gary This Docu	ment, state of Indiana 46404rty of , and
Barbara LaBroi the Lag	antee of Po Box 435
City of Schererville	, State of Indiana 46375
For valuable consideration, the Grantor hereby q	quitclaims and transfers all right, title, and interest held by the
	d improvements to the Grantee, and his or her heirs and assigns, to
have and hold forever, located at _4350 W 5TH AV	
City of Gary	, State of Indiana :
(45-06-06-301-007.000-004)	25FT. WIDE ADJ. N. LINE 5TH AVE. W1/2 S.6 T.36 R.8 , 29 A.
Subject to all easements, rights of way, protective	e covenants, and mineral reservations of record, if any. Taxes for
the tax year of 2009 shall be prorated bet deed.	e covenants, and mineral reservations of record, if any. Taxes for ween the Grantor and Grantee as of the major of the Grantor and Grantee as of the major of the Grantor and Grantee as of the major of the Grantor and Grantee as of the major of the Grantor and Grantee as of the Grant of the

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MAY 1 7 2011

PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR 18.00 Casic LR

Dated: September 29, 2010	
Barbara LaBre	of Bailara Johnson
Signature of Grantor	
Barbara Johnson	
Name of Grantor	
A (1)	
Signature of Witness #1	Donna Wyrdbell
Signature of witness #1 /	Printed Name of Witness #1
	/
Signature of Witness #2	Laura Reising
Signature of witness #2	Printed Name of Witness #2
State of Indiana County of On May 17, dell the Grantor,	talle
	Baibara Johnson- La Broi
personally came before me and, being duly sworn, did state an	d prove that he/she is the person described in the above
document and that he/she signed the above document in my pres	sence.
This Document is  Allene Rweb the Lake Coun  Notary Signature Jacque Buck	JACQUE BROCK Lake County My Commission Expires
Notary Signature Jacque Buck	June 3, 2015
Notary Public, In and for the County of State of _	Tochiava
My commission expires: June 3, 2015	Seal
Send all tax statements to Grantee.	
SUNDER	
PER ILLO	M. UNDER THE PENALTIES FOR
ABLEDCA	THAT I HAVE TAKEN REASON. Y NUMBER IN THIS DOCUMENTS
SECURIT	NUMBER IN THIS DOCUMENT.
THE MILED	BY: