

LAKE COUNTY
RECORDS & CLERK

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LAKE COUNTY
RECORDS & CLERK

Recording requested by: _____ Space above reserved for use by Recorder's Office
 When recorded, mail to: _____ Document prepared by:
 Name: Gregory A Goble Name Linda WIECHNIK
 Address: 3057 E 10th St Address 3057 E 10th St
 City/State/Zip: Hobart In, 46342 City/State/Zip Hobart In 46342
 Property Tax Parcel/Account Number: 26-34-0138-0007

Quitclaim Deed

Document is NOT OFFICIAL!

This Quitclaim Deed is made on August 1, 2011, between
Linda WIECHNIK, Grantor, of 3057 E 10th St
 _____, City of Hobart, State of Indiana,
 and Gregory A Goble, Grantee, of 3057 E 10th St
 _____, City of Hobart, 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 7435 Jackson Street
 _____, City of Hammond, State of Indiana:

Lot 7 in Block 3 in Homeseekers Addition, in the City of Hammond, as per plat thereof, recorded in Plat Book 10, page 29, 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 at the time of recording of this deed.

054618

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

★NOVA Quitclaim Deed Pg.1 (07-09)
 AUG 04 2011

PEGGY HOLINGA KATONA
 LAKE COUNTY AUDITOR

1800
 CS
 RM

Dated: August 2011

Linda Wiechnik
Signature of Grantor

Linda Wiechnik
Name of Grantor

Signature of Witness #1 _____ Printed Name of Witness #1 _____
This Document is the property of the Lake County Recorder!

Signature of Witness #2 _____ Printed Name of Witness #2 _____

State of Indiana County of Lake
On August 1, the Grantor, Linda Wiechnik,
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.

Angeline H. Zornke
Notary Signature Angeline H. Zornke



"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 Porter State of Indiana
My commission expires: 10-29-14 Seal

Send all tax statements to Grantee.