

3

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2011 073439

2011 DEC 19 AM 11:39

MICHELLE B. FAJMAN  
RECORDER

Recording requested by: \_\_\_\_\_ Space above reserved for use by Recorder's Office  
 When recorded, mail to: \_\_\_\_\_ Document prepared by:  
 Name: JENNIFER ARNOLD Name: HARVEY CRAWFORD  
 Address: 7149 ALEXANDER AV. Address: 2027 ALABAMA ST.  
 City/State/Zip: HAMMOND, IN 46323 City/State/Zip: GARY, IN 46407  
 Property Tax Parcel/Account Number: 45-67-09-378-014 000-023

7

### Quitclaim Deed

NOT OFFICIAL!

This Quitclaim Deed is made on DEC 6 2011, between  
HARVEY CRAWFORD, Grantor, of 7149 ALEXANDER AV.  
 \_\_\_\_\_, City of HAMMOND, State of INDIANA,  
 and JENNIFER ARNOLD (FKA CRAWFORD), Grantee, of 7149 ALEXANDER AV.  
 \_\_\_\_\_, City of HAMMOND, 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 7149 ALEXANDER AV.  
 \_\_\_\_\_, City of HAMMOND, State of INDIANA:

Lot 10 IN Block 6 IN GREEN LAWN ADDITION to Hammond,  
 AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 17 PAGE 28 IN THE  
 OFFICE OF THE RECORDER OF LAKE COUNTY INDIANA  
 Key Number: 007-26-33-0189-0009

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.

057681

DEC 19 2011

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

DULY ENTERED FOR TAXATION SUBJECT TO  
FINAL ACCEPTANCE FOR TRANSFER

DEC 17 2011

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

\*NOVA Quitclaim Deed Pg.1 (07-09)

~~004687~~

\$20  
CS  
CW

Dated: 6 Dec 2011

[Signature]  
Signature of Grantor

Harvey Crawford  
Name of Grantor

"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]

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 6, 2011, the Grantor, HARVEY CRAWFORD, 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.

Carol J. Cody  
Notary Signature



Notary Public, CAROL J. CODY

In and for the County of LAKE State of INDIANA

My commission expires: \_\_\_\_\_ Seal  
CAROL J. CODY  
Notary Public  
State of Indiana  
My Commission Expires Oct 11, 2014

Send all tax statements to Grantee.



OFFICE OF THE LAKE COUNTY RECORDER

LAKE COUNTY GOVERNMENT CENTER
2293 NORTH MAIN STREET
CROWN POINT, INDIANA 46307

MICHELLE R. FAJMAN
Recorder

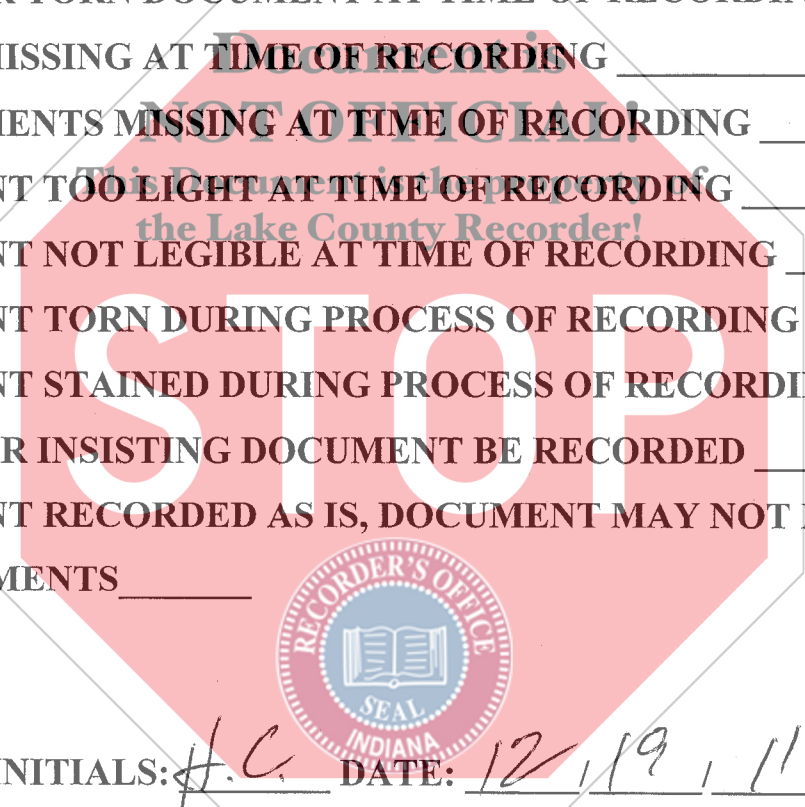


PHONE (219) 755-3730
FAX (219) 755-3257

DISCLAIMER

This document has been recorded as presented.
It may not meet with State of Indiana Recordation requirements.

- 1. STAINED DOCUMENT AT TIME OF RECORDING [X]
2. RIPPED OR TORN DOCUMENT AT TIME OF RECORDING
3. PAGE(S) MISSING AT TIME OF RECORDING
4. ATTACHMENTS MISSING AT TIME OF RECORDING
5. DOCUMENT TOO LIGHT AT TIME OF RECORDING
6. DOCUMENT NOT LEGIBLE AT TIME OF RECORDING
7. DOCUMENT TORN DURING PROCESS OF RECORDING
8. DOCUMENT STAINED DURING PROCESS OF RECORDING
9. CUSTOMER INSISTING DOCUMENT BE RECORDED
10. DOCUMENT RECORDED AS IS, DOCUMENT MAY NOT MEET STATE REQUIREMENTS



CUSTOMER INITIALS: H.C. DATE: 12, 19, 11

EMPLOYEE INITIALS: CA DATE: 12, 19, 11

