

2013 050096

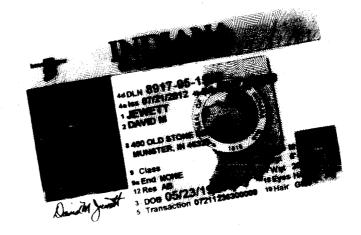
STATE OF INCIA... LAKE COUNTY FILED FOR RECORD

2013 JUL 10 PM 12: 08

MICHAEL B. BROWN RECORDER

Recording requested by: DAVID M. TEWETT	Space above reserved for use by Recorder's Office	
When recorded, mail to:	Document prepared by:	
Name: David M. Jewett	Name David M. JEWETT	
Address: 450 Old Stone Roxs #7	Address 450 Old Stove Rand #7	
City/State/Zip: Muster IN. 46321	City/State/Zip Munster, IN 46321	
Property Tax Parcel/Account Number: 45-06-12-253-014.000-023		
Quitclaim Deed		
This Quitclaim Deed is made on July to Day M. Jewett This Document, Grantor,	of 450 Old Stove Road #7	
	Notate of TNDIANA,	
and David M. Jenett Emmie A. Lowa, Grant		
	, State of INDIANA.	
, 33		
For valuable consideration, the Grantor hereby quitclain	ms and transfers all right, title, and interest held by	
the Grantor in the following described real estate and in	nprovements to the Grantee, and his or her heirs	
and assigns, to have and hold forever, located at 43.	5 CHERRY STREET	
, City of Hammon D		
Lot 42 43 114 Block 14 South H	Ammond, Sub & 51/3 Ft Lot42 BLIA ALL	
County of Lake State of INS	143 BLIFALL LOT 44 Bl. IC	
COLUITY OF LAKE, STATE OF LAS	STANA - 3 BA, IF ALL LOT 44 DI. IC	
Subject to all easements, rights of way, protective coverage Taxes for the tax year of 2013 shall be provided.	nants ond animonisual ECT ations of record, if any. RED TANCE FOR THANSFER BETWEEN the Grantor and Grantee as of the date of	
recording of this deed.	JUL 1 0 2013 Quitclaim Deed Pg.1 (11-12)	
0.5	CGY HOLINGA KATONA	
PE L	GGY HOLINGA KATONA AKE COUNTY AUDITOR 13584	
	\mathcal{V}	

Dated: July 10th, 201	13	
Signature of Grantor		
DAVID M. JEWE Name of Grantor	ETT	
Signature of Witness #1	OCYMEBRYAN K BE OFF Printed Name of Witness #	PAVERS
This Document of the Lai	ment is the property of ke County Reford	RESTLE
Signature of Witness #2 State of Indiana	Printed Name of Witness # County of Lake	2
On July 10th, 2013 personally came before me and, being duly	, the Grantor,, the Grantor,, the Grantor,, where the state and prove that he/she is	the person described
in the above document and that he/she sign	JOPN A. MENDEZ NOTARY PUBLIC STATE OF INDIANA	
Name P. I.	RESIDER PORTER COUNTY MY COMPAGNICATION FOR IT IN 18-2015	
In and for the County of Lake Food	fer State of Indiana	
My commission expires:	13-2015	Seal
Send all tax statements to Grantee.	"I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT I HAVE TAKEN REASON-ABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW." PREPARED BY:	Quitclaim Deed Pg.2 (11-12)



Document is NOT OFFICIAL! This Document is the property of the Lake County Recorder!