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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2013 090241

2013 DEC -9 PM 2:54

MICHAEL B. BROWN
RECORDER

Recording requested by: Darrell A. Johnson Space above reserved for use by Recorder's Office

When recorded, mail to: _____ Document prepared by: _____

Name: Darrell A. Johnson Name Darrell A. Johnson

Address: 4037 E. 13th AVE. Address 4037 E. 13th AVE.

City/State/Zip: Gary, IN 46403 City/State/Zip Gary, IN 46403

Property Tax Parcel/Account Number: 45-08-12-254-004.000-004

Quitclaim Deed

Document is
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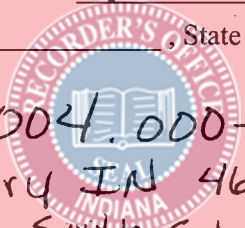
This Quitclaim Deed is made on Nov. 11 2013, between
Tammy Johnson, Grantor, of 4037 E. 13th AVE.
City of Gary, State of INDIANA
and Darrell A. Johnson, Grantee, of 4037 E. 13th AVE.
City of Gary, State of INDIANA

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 4037 E 13th AVE
City of Gary, State of INDIANA

45-08-12-254-004.000-004
4037 E. 13th AVE. Gary IN 46403

Lot 4 IN AETNA MANOR Sixth Subdivision, IN The City Gary, AS PER PIAI THEREOF, RECORDED IN Plat Book 31, PAGE 49, 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 2013 shall be prorated between the Grantor and Grantee as of the date of recording of this deed.



DEC 09 2013

Quitclaim Deed Pg. 1 (1-1-12)
16862

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

18.00
CASH

PP

Dated: Nov. 11 2013

Tommy Johnson
Signature of Grantor

Tommy Johnson
Name of Grantor

Darrell Johnson
Signature of Witness #1

Darrell Johnson
Printed Name of Witness #1

Arthur Johnson
Signature of Witness #2

ARTHUR JOHNSON
Printed Name of Witness #2

State of _____ County of _____

On _____, the Grantor, _____,

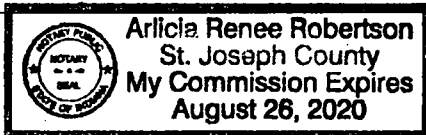
personally came before me and, being duly sworn, did state and prove that he/she is the person described in the above document and that he/she signed the above document in my presence.

Arlicia Robertson
Notary Signature

Notary Public,

In and for the County of St Joseph State of Indiana

My commission expires: _____ Seal



Send all tax statements to Grantee.

"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: _____