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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2014 010810

2014 FEB 24 AM 9:30

MICHAEL D. BROWN  
RECORDER

Recording requested by: Cherokee Crawford Space above reserved for use by Recorder's Office

When recorded, mail to:

Document prepared by:

Name: Cherokee Crawford

Name Cherokee Crawford

Address: 1536 Harrison St.

Address 1536 Harrison St.

City/State/Zip: Gary In 46407

City/State/Zip Gary In 46407

Property Tax Parcel/Account Number: 45-08-09-401-003.000-004

### Quitclaim Deed

**NOT OFFICIAL!**

This Quitclaim Deed is made on August 26, 2013, between

Alfreda Crawford, Grantor, of 1536 Harrison St.,  
City of Gary 46407, State of Indiana,

and Cherokee Crawford, Grantee, of 1536 Harrison St.,  
City of Gary 46407, State of Indiana 46407.

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 1528-30 Harrison St.,  
City of Gary, State of Indiana 46407:

C.T.L. & I. CO'S 5TH ADD. ALL L. 4BL. 17A



DULY ENTERED FOR TAXATION SUBJECT  
FINAL ACCEPTANCE FOR TRANSFER

00655

FEB 24 2014

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 of the date of recording of this deed.

1.00 ONE DOLLAR

Quitclaim Deed Pg.1 (11-12)

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

18.00  
CASH  
PP

Dated: August 26, 2013

Alfreda Crawford  
Signature of Grantor

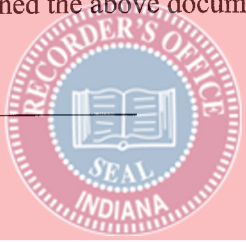
Alfreda Crawford  
Name of Grantor

LeDarryl Lee Signature of Witness #1      LeDARRYL Lee Printed Name of Witness #1

[Signature] Signature of Witness #2      Patricia Ann Owens-Lee Printed Name of Witness #2

State of IN County of Lake  
On Jan. 27, 2014, the Grantor, Alfreda 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.

[Signature]  
Notary Signature



Notary Public,  
In and for the County of Lake State of IN  
My commission expires: 5-31-2017 Seal

Send all tax statements to Grantee.