

2014 030176

2014 MAY 27 AM 9:27

MICHAEL B. BROWN
RECORDER

THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS, AND INSERTION OF SPECIAL CLAUSES, MAY CONSTITUTE THE PRACTICE OF LAW WHICH SHOULD ONLY BE DONE BY A LAWYER.

MAIL TAX BILLS TO: City of Gary, 839 Broadway, Suite S200, Gary, Indiana 46402

QUITCLAIM DEED

Linda Oliver, 372 Durbin St, Gary, Indiana 46406

THIS INDENTURE WITNESSETH, that

GRANTOR(S) of Lake County in the State of Indiana

QUITCLAIM(S) to City of Gary - a Municipal Corporation

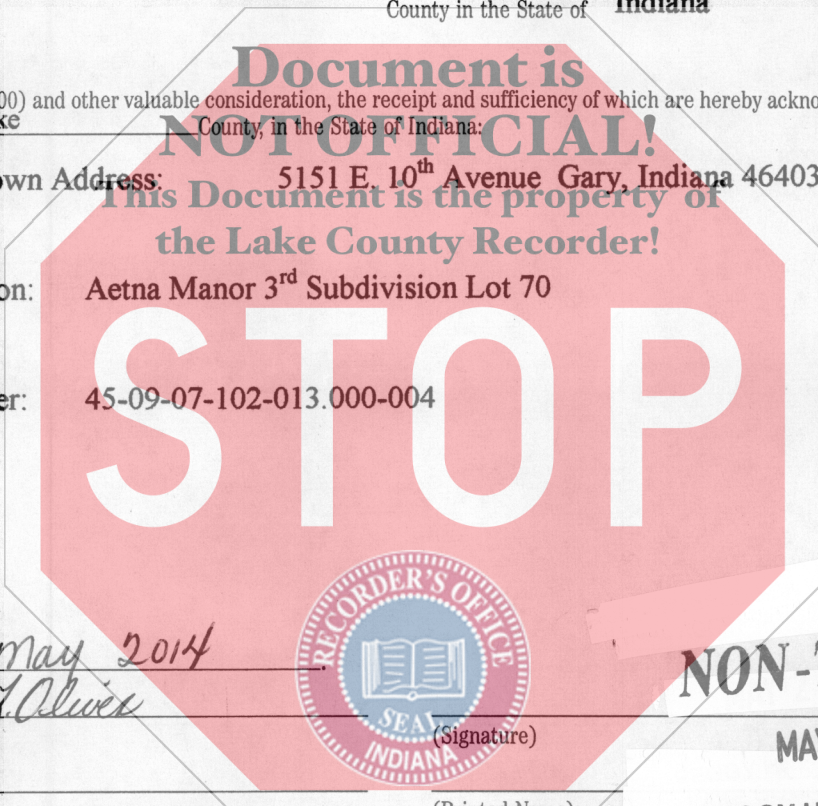
GRANTEE(S) of Lake County in the State of Indiana

in consideration of One Dollar (\$1.00) and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the following described real estate in Lake County, in the State of Indiana:

Commonly Known Address: 5151 E. 10th Avenue Gary, Indiana 46403

Legal Description: Aetna Manor 3rd Subdivision Lot 70

Property Number: 45-09-07-102-013.000-004



Dated this 12th day of May 2014
By: Linda Oliver
(Signature) Linda Oliver
(Printed Name)



NON-TAXABLE
MAY 23 2014

(Signature) _____
(Printed Name) _____

(Signature) _____
(Printed Name) _____
PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR
22972

STATE OF INDIANA, COUNTY OF Lake SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 12th day of May 2014, personally appeared: **LINDA OLIVER** and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My commission expires: 11-23-2016 Signature Carrol Pirtle
Resident of Lake County Printed Carrol Pirtle, Notary Public

This instrument prepared by Niquelle Allen, acting in her official Capacity as Corporation Counsel for the City of Gary, Indiana Attorney at Law, Attorney No. 24553-45

MAIL TO: **GRANTEE**
City of Gary - Department of Redevelopment
839 Broadway - Suite S200
Gary, Indiana 46402

AMOUNT \$ 16.00
CASH _____ CHARGE _____
CHECK # 9095306681
OVERAGE _____
COPY _____
NON-COM _____
CLERK CP

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