STATE OF INCLES LAKE COUNTY FILED FOR RECORD

2014 049013

2014 AUG 14 AM 10: 39 MICHAEL 5. BROWN RECORDER

Recording requested by: Marcula Yooch	Space above reserved for use by Recorder's Office
When recorded, mail to:	Document prepared by:
Name: Marcella Sooch	Name Marcella Gooch
Address: 2475 Vermillion St.	Address <u>2475 Vermellion</u> St
City/State/Zip: State Station, In 4640	5City/State/Zip Sabe Station In 46405
City/State/Zip: State Stateon, In 46405City/State/Zip Sabe Stateon In 46405City/Stateon In 46405	
	FINAL ACCEPTANCE
Auitclain	Deed TRANSFER
Deed 406 14 2014	
ranster o	PEGGY HOLINGA LAKE OF THE LAKE OF THE PEGGY HOLINGA LAKE OF THE PEGGY
This Quitclaim Deed is made on August	PEGGY HOLINGA KATOWEEN 25728 of 2415 Vermillon St.
Marcella Looch, Grantor,	of 2415 Vermelion St.
, City of Sape Station	, State of Ordiana,
and Translate on Death. Gran	tee, of 2475 yernillion
City of Edge Harren	Hooch Sean D. Hooch, State of Indiana.
For valuable consideration, the Grantor hereby quitclai	ms and transfers all right, title, and interest held by
the Grantor in the following described real estate and in	
and assigns, to have and hold forever, located at 2475 vermillion St.	
, City of Labe Station , State of Ondiana :	
Lot 26 and the South 5 feet of Lot 27 in block	
3 of delisto Park Subdivision, Lake Station	
in Lake County Orde	
0	
Subject to all easements, rights of way, protective cove	enants, and mineral reservations of record, if any.
A . 1	between the Grantor and Grantee as of the date of
ALEC DICCI	OSURE NEEDED
	Outheledes David De 1 (11 10)
Approved Assesse	or's Office
and .	_
By:///4/	

Dated: <u>August 12</u> , 2014
X Jaralla Gooch Signature of Grantor
Marcella Gooch Name of Grantor
Document is Word OFFICIAN Duron Signature of Witness #1 This Document is the Printed Name of Witness #1
Signature of Witness #2 The Yake County Recorder! REMAE VELLEAU FIN Printed Name of Witness #2
State of INDIANA County of LAKE On August 12, 2014, the Grantor, MARCE 11a Gooch,
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. "I AFFIRM, UNDER THE HENALTIES FOR PERJURY, THAT I HAVE TAKEN REASONABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW." PREPARED BY: PREPARED BY:
Notary Public,
In and for the County of AKE State of TND/ANA My commission expires: $8-14-14$ Seal
My commission expires: $8-14-14$ Seal
Send all tax statements to Grantee. Official Seal LY: KOSTBABE Rev. of Lake County, IN My commission expires August 14, 2014 August 14, 2014