

LF298-04

2016 047355

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 JUL 27 AM 8:49

MICHAEL B. BROWN
RECORDER

QUITCLAIM DEED

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THIS QUITCLAIM DEED, executed this _____ day of _____ (year)

by first party, Grantor, Nicole L. Dixon

whose post office address is 1645 West 12th Ave - Gary, IN

to second party, Grantee, Christ Center Church Inc.

whose post office address is 635 E. 10th Ave - Gary, IN 46404
d taxes

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NOT OFFICIAL!
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the Lake County Recorder!**

WITNESSETH, That the said first party, for good consideration and for the sum of

Ten Dollars (\$10) paid by the said second

party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of _____, State of _____ to wit:

Parcel NO.: 45-01-01-437-021-000-004

Brief Legal Description: New Brunswick Addition Lot 12
See ATTACH Block 16

commonly known as: 644 Clark Road, Gary, IN

certificate NO.: 4514103143

014094

20.
CASH
27

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Page 1

Rev. 01/01

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Approved Assessor's Office

By: _____

NO SALES DISCLOSURE NEEDED

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness

Print name of Witness

Signature of Witness

Print name of Witness

Signature of First Party

Print name of First Party

Signature of First Party

Print name of First Party

State of Indiana
County of Lake

On June 9, 2016 before me, Taelyn Fowler
appeared Micole Dixon

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.

Taelyn Fowler
Signature of Notary

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Affiant _____ Known _____ Produced ID _____
Type of ID State ID (Seal)

State of Indiana
County of Lake

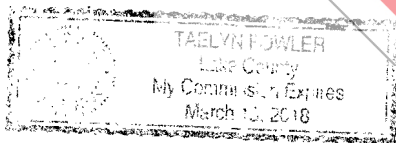
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Taelyn Fowler
Signature of Notary



Affiant _____ Known _____ Produced ID _____
Type of ID State ID (Seal)



Signature of Preparer

Print Name of Preparer

Address of Preparer

"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: R.M.

