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| | | | LAKE CUURTY | | |
| | 2016 | 048707 | FILED FOR RECORD | | |
| | | 040707 | 2016 AUG - 1 PM 3:5 | 1 | |
| <i>i</i> in | | | MICHAEL & BROWN RECORDER | · | |
| X | QU | ITCLAIM D | EED | | |
| · | THIS QUITCLAIM DEED, e> | Recuted this St. | day of August | (year). 3016 | |
| by first | party, Grantor, Gregov | s Moore | | | |
| whose p | party, Grantor, Gregory | y, Indiana | | × | |
| to secon | nd party, Grantee, Phyllis | P. Johnson | ſ | | |
| whose j | post office address is Calur | ret City, IL | Din | K~ | |
| | 1263 | South Pa | the Street Fin, | Y ENTERED FOR TAXATION SUBJE AL ACCEPTANCE FOR TRANSFER AUG 01 2015 | |
| | NOT | COFFICI | AL | AUG 0 | C7 |
| | This Docu | iment is the pro- | | - /0. | |
| | WITNESSETH, That he said | · · · · · · · · · · · · · · · · · · · | sideration and for the sum of | LINE PETALAS COUNTY AUDITOR | |
| \bigcirc | 10 Dollar | Dollars (\$ | , OO) paid by the said | second | |
| | he receipt whereof is hereby acki cond party forever, all the right, t | lowledged, does hereb | y remise, release and quitclair | n unto the | |
| followi | ng described parcel of land, and Ke, State of Ludy | improvements and app | | | |
| Ka. | | | | 2016 | |
| | Regal Camp | Loan Cos. 1 | 3 B. Sub, ALL, I | 3 64.0 | |
| C | ommon Address | nst ch | is St Gary | IN. | |
| _ | ncel Number | | And Charles | | |
| pa | 45-08-03-477 | -010,000-0 | 04 | | |
| | | | 0142 | ; 30 | / |
| © 1992-20 This produ | 01 E-Z Legal Forms, Inc. et does not constitute the rendering of legal adva | Page 1 ce or services. This product is into | ended for informational use only and is not a | Rev. 03/01 (D. 1) substitute for legal | X |
| advice. Sta | 01 E-Z Legal Forms, Inc. ct does not constitute the rendering of legal adva- te laws vary, so consult in a terme FORII legal m JNDER THE PENALTIES FORII legal m JNDER THE PENALTIES FORI I HAVE TAKEN REASON- AT I HAVE TAKEN REASON- TO REDACT EACH SOCIAL | atters. This product was not neces | sarily prepared by a person licensed to practic | ce taw in your state Ors | |
| DEDILIRY IM | AT I HAVE TAKEN IN SOCIAL TO REDACT EACH SOCIAL NUMBER IN THIS DOCUMENT, | NO SALES DISC | LOSURE NEEDED | -0. | |
| | UIRED BY LAW | Approved Assess | sor's Office | | |

PREPARED BY

By: 77 _____

| | | Signature of First Party | |
|---|--|--|---|
| Print name of Witness | • . ¹ | Print name of First Party | · · · · · · · · · · · · · · · · · · · |
| Signature of Witness | ۰ | Signature of First Party | |
| Print name of Witness | | Print name of First Party | |
| State of County of | | | |
| On appeared | before me, | 4 | , |
| WITNESS my hand and of | | of which the person(s) acted, executed | the instrument. |
| Signature of Notary | | AffiantKnown | Produced ID |
| State of Juliany County of Cales | | FICIAL! | |
| On <u>8-1-2015</u> appeared <u>Management</u> personally known to me (o whose name(s) is/are subsc executed the same in his/he instrument the person(s), o WITNESS my hand and of | or proved to me on the ba cribed to the within instru- er/their authorized capaci or the entity upon behalf of fricial seal. | The page 35 state ty Recorder! sis of satisfactory evidence) to be the ument and acknowledged to me that h ity(ies), and that by his/her/their signa of which the person(s) acted, executed | e/she/they ture(s) on the |
| On $ \$$ -1 - P. of $\$$ - personally known to me (o whose name(s) is/are subsc executed the same in his/he instrument the person(s), o | or proved to me on the ba cribed to the within instru- er/their authorized capaci or the entity upon behalf of fricial seal. | ty Recorder! sis of satisfactory evidence) to be the ument and acknowledged to me that h ity(ies), and that by his/her/their signa | e/she/they iture(s) on the I the instrument. Produced ID |
| On $ 8$ -1 - P - $16T$, appeared M_{10} - $16T$, personally known to me (o whose name(s) is/are subsc executed the same in his/he instrument the person(s), o WITNESS my hand and of Qure Qure Qure | KI | AffiantKnown | e/she/they iture(s) on the I the instrument. |
| On <u>S-1-POID</u> appeared <u>Manual</u> personally known to me (o whose name(s) is/are subsc executed the same in his/he instrument the person(s), o WITNESS my hand and of <u>CarOLA</u> , <u>Jacob</u> Signature of Notary CAROLA, <u>JAROSZEWS</u> NOTARY PUBLIC LAKE COUNTY, STATE OF IN | KI | Affiant Known Type of ID JC4 Wor | e/she/they iture(s) on the I the instrument. Produced ID |

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