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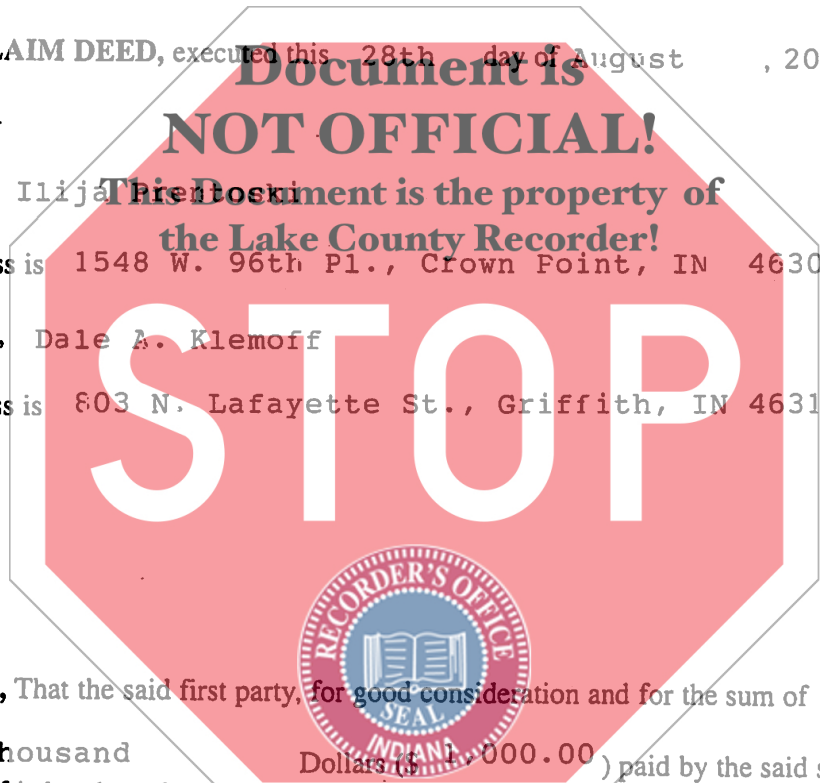
LF298-04

2017 058208

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
2017 AUG 28 PM 3:56
MICHAEL B. BRUN
RECORDER

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 28th day of August, 2017 (year),



by first party, Grantor, Ilija
whose post office address is 1548 W. 96th Pl., Crown Point, IN 46307
to second party, Grantee, Dale A. Klemoff
whose post office address is 803 N. Lafayette St., Griffith, IN 46319

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

One Thousand

Dollars (\$1,000.00)

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 Lake, State of Indiana to wit:

Property Number: 45-11-11-256--023.000--032

DULY ENTERED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER

W.H. Stiver's Addition, Lot 9, Block 14
(1418 Dwiggins Ave., SttJohn Township, IN)

AUG 28 2017

JOHN E. PETALAS
LAKE COUNTY AUDITOR

H1534

\$ 25100

Prepared By: Denise R. Sulek

Cash

JTB

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

Ilija Prentoski
Signature of First Party

Print name of Witness

Ilija Prentoski
Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

State of Indiana
County of Lake
On

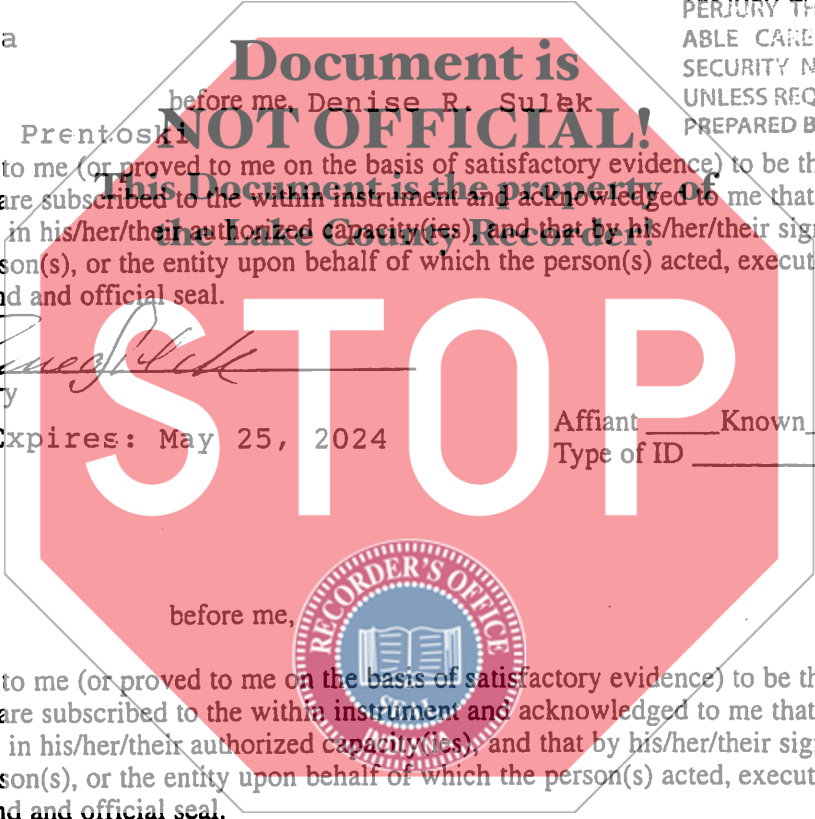
appeared Ilija Prentoski

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.

Denise R. Sulak
Signature of Notary

Commission Expires: May 25, 2024

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: Denise R. Sulak



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

State of
County of
On
appeared

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.

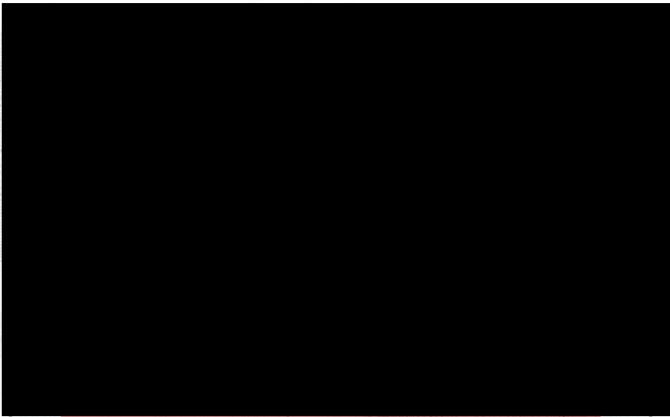
Signature of Notary

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

Signature of Preparer

Print Name of Preparer

Address of Preparer



**This Document is the property of
the Lake County Recorder!**

STOP

