2017 072507

STATE OF INGIANA LAKE COUNTY FILED FOR RECORD

2017 OCT 26 PH 4: 19

MICHAEL S. BROWN-RECORDER

Ouitalaine Daad

	Qui	cciaim D	veea	
RECORDING REQUI		COFFICE OFFICE	ARA Arnald	J. Cook)
Almond J. Co.	OKLAYA Arm	પ્રીત_, Grantee(s)		
J. COOK) 401	3 Van Buren		roperty of	
GARY, IN	to403 the La	ike County Red	corder!	
Consideration: \$				
Property Transfer Tax	:\$			
Assessor's Parcel No	: 45-08-28	-256-008.00	0-004	OUR IFCT
PREPARED BY:		Jones c	ertifies herein that the O	Fig. TAXATION SUBJECTED
this Deed.			FINAL ACCE	TANCEFORT
(1.0'. C	& - Compas			26 2017
Signature of Preparer	2 (fores		Date of Preparation	
Tillo Com	c-Jones	TOPOLICA OF THE	100	HIN E. PETALAS COUNTY AUDITOR () 28442
Printed Name of Prep			LAKE	COUNTY AUDITORY & CO
THIS QUITCLAIM	DEED executed	on 63-21-201	in the Co	unty of
LAKE		Allimin	in the co	antry of
	, State of		atd T Cook	
by Grantor(s), All			ald J. (ook)	
-		<u>Van Buren S</u>	F. GARY, IN	46408.
to Grantee(s), Ar				
whose post office a	nddress is <u>4013</u>	<u>Van Buren</u>	St. GIARY, I	N 46408,
WITNESSETH, tha	t the said Grantor	(s), Almond J.	COOK CAKA AY	mald J. Cook)
		um of <u>Ten Dol</u>		
(\$ 1D-0D		d Grantee(s), the rec		by acknowledged.
does nereby remis	e, release and qu	itclaim unto the said	u Grantee(s) lorever	, all the right, the \wedge
80	NO ON EO DI			O Unitediate Board 5-15 by 1 of 4
© SmartLegalForms	NO SALES DIS	SCLOSURE NEEDE	ED INS	A PURICIPATION OF THE PROPERTY
	Approved Ass	assoris Office	4	SEAL TY, STATE OF INDIANA
			I COMMIS	SION NO. 633374 EXPIRES FEBRUARY 27, 2020
	Bu.	17	MY COMMISSION E	AFINES FEBRUARIT ET, EVEN

Exhibit "A"

THE NORTH 2 1/2 FEET OF LOT 24, ALL OF
LOT 25, AND THE SOUTH 5 FEET OF LOT
ZLE, IN BLOCK 1 IN SANFORD TUBBS'
FIRST ADDITION TO SOUTH GARY, IN
THE CITY OF GORVINGER PLAT
THEREOF, REDORDED FIN CHUAT! BOOK 8, PAGE
This Document is the property of 25, IN THEHEDAKE TRULY DECORDER
OF LAXE COUNTY, INDIANA.
THE PLANT OF THE PARTY OF THE P
SEAL WOLAND TO THE SEAL OF THE

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LF298 Quitclaim Deed 6-15, Pg. 4 of 4

interest and claim which the said G	Grantor(s) have in and to the following described parcel of
land, and improvements and appurte	enances thereto in the County of,
State of and i	more specifically described as set forth in EXHIBIT "A"
to this Quitclaim Deed, which is attac	ched hereto and incorporated herein by reference.
	rantor(s) has signed and sealed these presents the day and
year first above written. Signed, sea	led and delivered in presence of:
GRANTOR(S):	
armale a. Com	Se
Signature of Grantor	Signature of Second Grantor (if applicable)
ARnald J/C	locument is
Print Name of Grantor	Print Name of Second Grantor (if applicable)
ALLA Almond Thicook	ument is the property of
Signature of First Witness to Granter(s)	the County Signature of Second Witness to Grantor(s)
Distance of Six Williams	District Second Miles and Overstands
Print Name of First Witness to Grantor(s	Print Name of Second Witness to Grantor(s)
ODANITE(O)	
GRANTEE(S):	
Signature of Grantee	Signature of Second Grantee (if applicable)
	(Sampliaghla)
Print Name of Grantee	Print Name of Second Grantee (if applicable)
	SEAL SEAL
Signature of First Witness to Grantee(s)	Signature of Second Witness to Grantee(s)
Print Name of First Witness to Grantee(s	Print Name of Second Witness to Grantee(s)

NOTARY ACKNOWLEDGMENT State of . County of public in and for said state, personally appeared, who are known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument. WITNESS my hand and official seal.) Octimen Signature of Notary ument is the property of Affiant Known ce County Recorder! Type of ID _ IRIS D KANAVOS NOTARY PUBLIC SEAL "I AFFIRM, UNDER THE PENALTIES FOR LAKE COUNTY, STATE OF INDIANA COMMISSION NO. 633374 PERJURY THAT I HAVE TAKEN REASON-MMISSION EXPIRES FEBRUARY 27, 2020 ABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED IN LAW PREPARED BY:_

