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MICHAEL B. BROWN  
RECORDER

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# Quitclaim Deed

## Document is

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AND WHEN RECORDED MAIL TO:

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ALEEZA SMITH Grantee(s) <sup>13</sup>  
1315 W. 90<sup>TH</sup> AVS. Apt. 202  
MERRILLVILLE, IN 46410  
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DULY ENTERED FOR TAXATION SUBJECT  
FINAL ACCEPTANCE FOR TRANSFER

DEC 1 2017

JOHN E. PETALAS  
LAKE COUNTY AUDITOR

Consideration: \$ \_\_\_\_\_  
Property Transfer Tax: \$ \_\_\_\_\_

Assessor's Parcel No.: \_\_\_\_\_

PREPARED BY: TIFFANY RICH certifies herein that he or she has prepared  
this Deed.

Tiffany Rich  
Signature of Preparer

12-1-17  
Date of Preparation

TIFFANY RICH  
Printed Name of Preparer

43273



THIS QUITCLAIM DEED, executed on 12-1-17 in the County of  
LAKE, State of INDIANA

by Grantor(s), ~~ALEEZA SMITH~~ TIFFANY RICH  
whose post office address is 2450 CLYDIA ST. PORTAGE, IN 46368  
to Grantee(s), ALEEZA SMITH  
whose post office address is 1315 W. 90<sup>TH</sup> AVS. Apt. 202 MERRILLVILLE, IN 46410

WITNESSETH, that the said Grantor(s), TIFFANY RICH,  
for good consideration and for the sum of 1500.00  
(\$ 1500.00) paid by the said Grantee(s), the receipt whereof is hereby acknowledged,  
does hereby remise, release and quitclaim unto the said Grantee(s) forever, all the right, title

25-  
CASH  
18

Approved Assessor's Office

By: [Signature]

interest and claim which the said Grantor(s) have in and to the following described parcel of land, and improvements and appurtenances thereto in the County of LAKE, State of INDIANA and more specifically described as set forth in EXHIBIT "A" to this Quitclaim Deed, which is attached hereto and incorporated herein by reference.

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

**GRANTOR(S):**

Tiffany Rich Signature of Grantor  
Signature of Second Grantor (if applicable)

TIFFANY RICH Print Name of Grantor  
Print Name of Second Grantor (if applicable)

Signature of First Witness to Grantor(s)  
Signature of Second Witness to Grantor(s)

Print Name of First Witness to Grantor(s)  
Print Name of Second Witness to Grantor(s)

**GRANTEE(S):**

Albeza Smith Signature of Grantee  
Signature of Second Grantee (if applicable)

ALBEZA SMITH Print Name of Grantee  
Print Name of Second Grantee (if applicable)

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)

"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: AS



NOTARY ACKNOWLEDGMENT

State of INDIANA

County of LAKE

On 12-1-17, before me, NANCY F VALENTINE, a notary public in and for said state, personally appeared, ALEEZA SMITH & TIFFANY RICH

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.

Nancy F Valentine  
Signature of Notary

Affiant Known

Type of ID D.L

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(Seal)



LEGAL DESCRIPTION:

AETNA MANOR 4<sup>TH</sup> SUB. ALL L. 15 BL. 2

PROPERTY NUMBER: 45-09-07-104-019.000-004



