STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 085573

2017 DEC 15 PM 12: 31

MICHAEL B. BROWN

THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. SELECTING A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS AND INSERTING SPECIAL CLAUSES MAY CONSTITUTE THE PRACTICE OF LAW, WHICH SHOULD BE PERFORMED ONLY BY A LAWYER.

Mail tax bills to: Innermission

P.O. Box 706

Hammond, IN 46325

## **QUIT CLAIM DEED**

| THIS INDENTURE WITNESSETA That The Rose  | Tioninson Revocable Living Trust, by Rosa L.        |
|--|---|
| THIS INDENTURE WITNESSETE That The Rose Thompson Trustee, Grantor of Lake County in the State of                 | of Indiana, OUNCLAIM(S) to Innermission, Inc.       |
| Grantee of Lake County in the State of Indiana, in consideration, the receipt and sufficiency of which are hereb | eration of Ten Dollar (\$10.00) and other valuable  |
| consideration, the receipt and sufficiency of which are hereb  | y acknowledged, the following described real estate |
| in Lake County, in the State of Their Document is th   | e property of                                       |
| the Lake County  | Recorder!   |

Legal Description:

STAFFORD & TRANKLES ADD. ALL L.8 BL.1

Parcel #45-03-30-381-004.000-023

Commonly Known As: 1010 Hoffman Street, Hammond, IN 46327.

Dated this 15th day of December, 2017.

STATE OF INDIANA

COUNTY OF LAKE

Rosa L. Thompson, Trustee

Rosa L. Thompson Revocable Living Trust

Before me, the undersigned a Notary Public in and for said County and State, this 15<sup>12</sup>day of December, 2017, personally appeared. Rosa Thompson and acknowledged the execution of the foregoing Quit Claim Deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My commission expires: 3-31-24
Resident of Lake County

31-24 Gudet

Judith A.

Hyvarinen

Printed, Notary Public

This instrument prepared by and should be returned to:

John P. Reed, Abrahamson, Reed & Bilse, 8230 Hohman Avenue, Munster, IN 46321. Phone: (219) 595-5306.

Social Security Reaction: I affirm, under penalties for perjury, that I have taken reasonable care to redact each Social service ber in this document, unless required by law.

the term this document, unless required by law.

DULY ENTERED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER

NO SALES DISCLOSURE NEEDED

By:

DEC 15 2017

JOHN E. PETALAS LAKE COUNTY AUDITOR

032338

Approved Assessor's Office

A<sub>l</sub> By