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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2019 037456

2019 JUN 21 AM 10:15

MICHAEL B. BROWN
RECORDER

Quitclaim Deed

RECORDING REQUESTED BY _____

AND WHEN RECORDED MAIL TO:

Cellos Williams, Grantee(s)

Consideration: \$ 0

Property Transfer Tax: \$ 0

Assessor's Parcel No.: 45-09-07-202-001-000-009

PREPARED BY: Ronnie Williams certifies herein that he or she has prepared this Deed.

[Signature]
Signature of Preparer

6/20/2019
Date of Preparation

Ronnie Williams
Printed Name of Preparer

THIS QUITCLAIM DEED, executed on 6/20/2019 in the County of LAKE, State of INDIANA

by Grantor(s), Ronnie Williams,

whose post office address is 502 WASHINGTON ST. DOCTON IN 46415,

to Grantee(s), Cellos Williams,

whose post office address is 6700 Ironwoods Ave Gary 46403,

WITNESSETH, that the said Grantor(s), Ronnie Williams,

for good consideration and for the sum of 0

(\$ 0) 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

DULY ENTERED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER

NO SALES DISCLOSURE NEEDED

LF298 Quitclaim Deed 7-17, Pg. 1 of 4

JUN 21 2019

051687 Approved Assessor's Office

JOHN E. PETALAS
LAKE COUNTY AUDITOR

By: [Signature]

\$2500
CASH
[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):

[Signature]
Signature of Grantor

RONNIE WILLIAMS
Print Name of Grantor

[Signature]
Signature of First Witness to Grantor(s)

[Signature]
Print Name of First Witness to Grantor(s)

[Signature]
Signature of Second Grantor (if applicable)

[Signature]
Print Name of Second Grantor (if applicable)

[Signature]
Signature of Second Witness to Grantor(s)

[Signature]
Print Name of Second Witness to Grantor(s)

GRANTEE(S):

[Signature]
Signature of Grantee

Cellus Williams
Print Name of Grantee

[Signature]
Signature of First Witness to Grantee(s)

[Signature]
Print Name of First Witness to Grantee(s)

[Signature]
Signature of Second Grantee (if applicable)

BERTHA L ADAMS WILLIAMS
Print Name of Second Grantee (if applicable)

[Signature]
Signature of Second Witness to Grantee(s)

[Signature]
Print Name of Second Witness to Grantee(s)

NOTARY ACKNOWLEDGMENT

State of Indiana

County of Lake

On June 20, 2019, before me, Laketra Williams, a notary public in and for said state, personally appeared, Ronnie Williams, Cellus Williams, and Bertha Williams

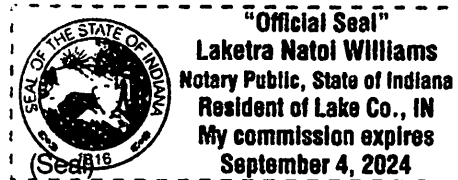
who are known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.

[Signature]
Signature of Notary

Affiant Known _____ Produced ID

Type of ID IN Drivers License



"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: [Signature]

