

STATEMENT REPORTER 2022-020558  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD 10:55 AM 2022 Jun 28

Prepared By:  
Ms. Lorraine V. Kucki  
971 High Meadow Dr  
Crown Point, Indiana 46307

2020-064234  
2020 Sep 15 3:59 PM  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
MICHAEL B BROWN  
RECORDER

After Recording Return To:  
Mr. Gregory Traicoff  
3740 W 48th Ave  
Gary, Indiana 46408

TAX PARCEL ID #: 45-15-09-201-005.000-013

Record to correct error in Name of Grantor Thomas/Dea

Property of Lake County Recorder

QUIT CLAIM DEED

BE IT KNOWN BY ALL, that Ms. Lorraine Kucki, ("Grantor") whose address is 971 High Meadow Dr, Crown Point, Indiana 46408, hereby REMISES, RELEASES AND FOREVER QUITCLAIMS TO Mr. Gregory Traicoff ("Grantee"), whose address is 3740 W 48th Ave, Gary, Indiana 46408, all right, title, interest and claim to the following real estate property located at 10207 West 109th Avenue in the City/Township of Cedar Lake, located in the County of Lake and State of Indiana and ZIP code of 46303, to-wit:

Property having Lot No. 45-15-09-201-005.000-013, with the Section No. , and having the following description: ~~PON & CO's Highway Acres L.S.~~ Lot 5 in Pon and Co's Highway Acres, as per plat thereof, recorded in Plat Book 25, page 4, in the office of the Recorder of Lake County, Indiana

FOR VALUABLE CONSIDERATION, in the amount of \$5,000.00 dollars, given in hand, and for other good and valuable consideration the receipt and sufficiency of which is hereby acknowledged.

BE IT FURTHER KNOWN, that this transfer shall be effective as of 07/27/2020, and that the Grantor makes no promises as to ownership of title to the above-referenced Property, but simply agrees to transfers whatever interest the Grantor has in it to the Grantee.

TO HAVE AND TO HOLD all of Grantor's right, title and interest in and to the above described Property is hereby transferred unto the Grantee, Grantee's heirs, administrators, executors, successors and/or assigns forever; so that neither Grantor nor Grantor's heirs, administrators, executors, successors and/or assigns shall have, claim or demand any right or title to the aforesaid property, premises or appurtenances or any party thereof.

Lorraine V. Kucki  
Lorraine V. Kucki

SEP 15 2020  
JOHN E. PETALAS  
LAKE COUNTY AUDITOR  
003457

JUN 28 2022  
JOHN E. PETALAS  
LAKE COUNTY AUDITOR

25 cc 4  
25 CS RM

(Grantor's Signature)

*Lorraine V. Kucki*  
Ms. Lorraine Kucki

(Grantor's Printed Name)

*Gregory Traicoff*  
(Grantee's Signature)

Mr. Gregory Traicoff

(Grantee's Printed Name)

Signed in our presence:

(Witness #1 Signature)

(Witness #2 Signature)

(FIRST WITNESS NAME TYPED)

(SECOND WITNESS NAME TYPED)

**Grantee's Address:**

Mr. Gregory Traicoff  
3740 W 48th Ave  
Gary, Indiana 46408

**Grantor's Address:**

Ms. Lorraine Kucki  
971 High Meadow Dr  
Crown Point, Indiana 46408

**Mail Subsequent Tax Bills To:**

Gregory Traicoff  
3740 Wees 48th Avenue  
Gary, Indiana 46408

"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: *Lorraine V. Kucki*

# NOT AN OFFICIAL DOCUMENT

STATE OF INDIANA

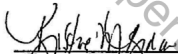
COUNTY OF LAKE

)  
) SS.  
)

The foregoing Quit Claim Deed was acknowledged before me on July 28 2020 by Ms. Lorraine Kucki, who is personally known to me or who has produced a valid driver's license and/or passport as identification, and such individual(s) having executed aforementioned instrument of his/her/their free and voluntary act and deed.

IN WITNESS THEREOF, to this Quit Claim Deed, I set my hand and seal.


Signed, sealed and delivered in the presence of:

  
(Signature of Notary)  
KRISTINE M REDAR  
(Printed Notary Name) Lake, Indiana

My Commission expires:

09-06-2020



"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: 

# NOT AN OFFICIAL DOCUMENT

## CERTIFICATE OF PROOF

WITNESS to the signature (s) on the foregoing instrument to which this Proof is attached.

[Handwritten Signature]  
Witness Signature

KRISTINE M REAR  
Witness Printed Name

### PROOF:

STATE OF Indiana

COUNTY OF Lake

Before me a Notary Public in and for said County and State, Dated on 09/14/20, personally appeared the above-named WITNESS to the foregoing instrument, who, being by me duly sworn, did depose and say that he/she knows WITNESS- KRISTINE REAR to be the individual(s) described in and who executed the foregoing instrument: that said WITNESS was present and saw said GRANTOR(S)- LOBBANEY (KAY) execute the same: and the said WITNESS at same time subscribed his/her name as a witness thereto

[Handwritten Signature]  
NOTARY PUBLIC SIGNATURE

Karen Hartmann  
NOTARY PRINTED NAME

Notary Name exactly as Commission

Notary Public- State of

Seal

My Commission Expires: 11/2/20

Commission No: 672558

KAREN HARTMANN  
NOTARY PUBLIC - OFFICIAL SEAL  
State of Indiana, Lake County  
My Commission Expires Nov. 2, 2023