

# NOT AN OFFICIAL DOCUMENT

Prepared By

Name: Ofelia Fonseca  
Address: 9163 Merrimack CT  
Saint John  
State: IN Zip Code: 46373

GINA PIMENTEL  
RECORDER  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2023-009162

10:48 AM 2023 Mar 24

After Recording Return To

Name: Ofelia Fonseca  
Address: 9163 Merrimack CT  
Saint John  
State: IN Zip Code: 46373

Space Above This Line for Recorder's Use

## QUIT CLAIM DEED

DULY ENTERED FOR TAXATION SUBJECT  
FINAL ACCEPTANCE FOR TRANSFER

STATE OF Indiana

MAR 24 2023

Lake COUNTY

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

KNOW ALL MEN BY THESE PRESENTS, That for and in consideration of the sum of

Ten dollars (\$ 10) in hand paid to  
Ofelia Fonseca, a \_\_\_\_\_, residing at 9163 Merrimack CT,  
County of Lake, City of Saint John, State of Indiana

(hereinafter known as the "Grantor(s)") hereby remise, release and forever quitclaim to  
Giovanna D. Esquivel, a \_\_\_\_\_, residing at 9163 Merrimack CT,  
County of Lake, City of Saint John, State of Indiana

(hereinafter known as the "Grantee(s)") all the rights, title, interest, and claim in or to the  
following described real estate, situated in Lake County,

Indiana, to-wit: Pin 450321.482-026-000-024  
Lot 30, Block 18 Plot of 4th Addition to Ind Harbor East Chicago  
Subdivision in East half section 21 Township 37 N Range 9 West  
of 3rd. P.M. Lake County Ind. book 5 Page 31 together with  
all rights and revenues.

[INSERT LEGAL DESCRIPTION HERE OR ATTACH AND INSERT]

To have and to hold, the same together with all and singular the appurtenances  
thereunto belonging or in anywise appertaining, and all the estate, right, title, interest,  
lien, equity and claim whatsoever for the said first party, either in law or equity, to the  
only proper use, benefit and behoof of the said second party forever.

"I AFFIRM, UNDER THE PENALTIES FOR  
PERJURY THAT I HAVE TAKEN REASON-  
ABLE CARE TO REDACT EACH SOCIAL  
SECURITY NUMBER IN THIS DOCUMENT,  
UNLESS REQUIRED BY LAW."  
PREPARED BY: O.F.



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*Oufelia*  
 Grantor's Signature  
Oufelia Fonseca  
 Grantor's Name  
9163 Merrimack Ct.  
 Address  
Saint John IN 46373  
 City, State & Zip

\_\_\_\_\_  
 Grantor's Signature  
 \_\_\_\_\_  
 Grantor's Name  
 \_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 City, State & Zip

In Witness Whereof,

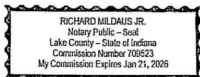
*Basma Abdelkader*  
 Witness's Signature  
Basma Abdelkader  
 Witness's Name  
508 sandpiper Dr  
 Address  
Schererville IN 46375  
 City, State & Zip

*Hortencia Moreno*  
 Witness's Signature  
HORTENCIA MORENO  
 Witness's Name  
69243 Huron Ave.  
 Address  
Portage, IN. 46368  
 City, State & Zip

STATE OF Indiana )  
 COUNTY OF Lake )

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that Oufelia Fonseca whose names are signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they, executed the same voluntarily on the day the same bears date.

Given under my hand this 24 day of March, 2023



*Richard Mildaas Jr*  
 Notary Public

My Commission Expires: January 21st 2026 <sup>(RM)</sup>  
 2026

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Property of Lake County Recorder

