NOT AN OFFICIAL BO

BY: JAS
PG #: 3
RECORDED AS PRESENTED

FILED FOR RECORD
GINA PIMENTEL
RECORDER

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

Oct 17 2023 BDD

PEGGY HOLINGA-KATONA LAKE COUNTY AUDITOR

/ V,		
6		
Prepared By:	After Recording Return To:	
NELO CONTRACTOR	_	
Name: MELCHOR CRUZ	Name: MELCHOR CRUZ AND MIRIAM CRUZ	
Address: 939 SUMMER ST	Address: 939 SUMMER ST	
HAMMOND, IN 46320	HAMMOND, IN 46320	
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.		
INDIANA QUIT CLAIM DEED		
STATE OF INDIANA	0/	
LAKE COUNTY	778	
THIS INDENTURE WITNESSETH, that for and	in consideration of the sum of	
TEN DOLLARS (\$ 10.0	in hand paid to	
MELCHOR CRUZ AND MIRIAM CRUZ a MA	RRIED COUPLE, residing at	
939 SUMMER ST, HAMMOND, IN 46320	- 6	
(hereinafter known as the "Grantor(s)") hereby r	emise, release, and forever quitclaim to	

MELCHOR CRUZ, MIRIAM CRUZ AND YULISSA CRUZ MORENO, a JOINT TENANTS , whose mailing address is

(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:

Space above this line for recorder's use only

eSign

939 SUMMER ST, HAMMOND, IN 46320

Page 1 of 3

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LOTS 37 AND 38, BLOCK 3 IN FOGG AND HAMMOND'S SECOND ADDITION TO THE CITY OF HAMMOND, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 2, PAGE 8, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

(WRITE LEGAL DESCRIPTION HERE OR ATTACH AND INSERTI

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.

Milia	Cost
Grantor's Signature	
MELCHOR CRUZ	
Grantor's Name	
DOO CLIMMED OF	

939 SUMMER ST Street Address HAMMOND, IN 46320

City. State & ZIP

Preparer's Name

Preparer's Signature
MELCHOR CRUZ

Grantor's Signature
MIRIAM CRUZ
Grantor's Name
939 SUMMER ST

Street Address HAMMOND, IN 46320 City, State & ZIP

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 Iaw. Melchor Cruz

Grantee's address/mailing address to which tax statements should be mailed is: 939 SUMMER ST, HAMMOND, IN 46320

NOT AN OFFICIAL DOCUMENT

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