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Mail tax bills to:

Hobart Federal
555 E. Third St.
Hobart, IN 46342

94003457

WARRANTY DEED

Key #18-175-1 Unit 27

OWNERS TITLE INS. CO. INC.
ONE PROFESSIONAL CENTER
SUITE 215
CROWN POINT, IN 46007

THIS INSTRUMENT WITNESSETH, That Laneiva Richmond

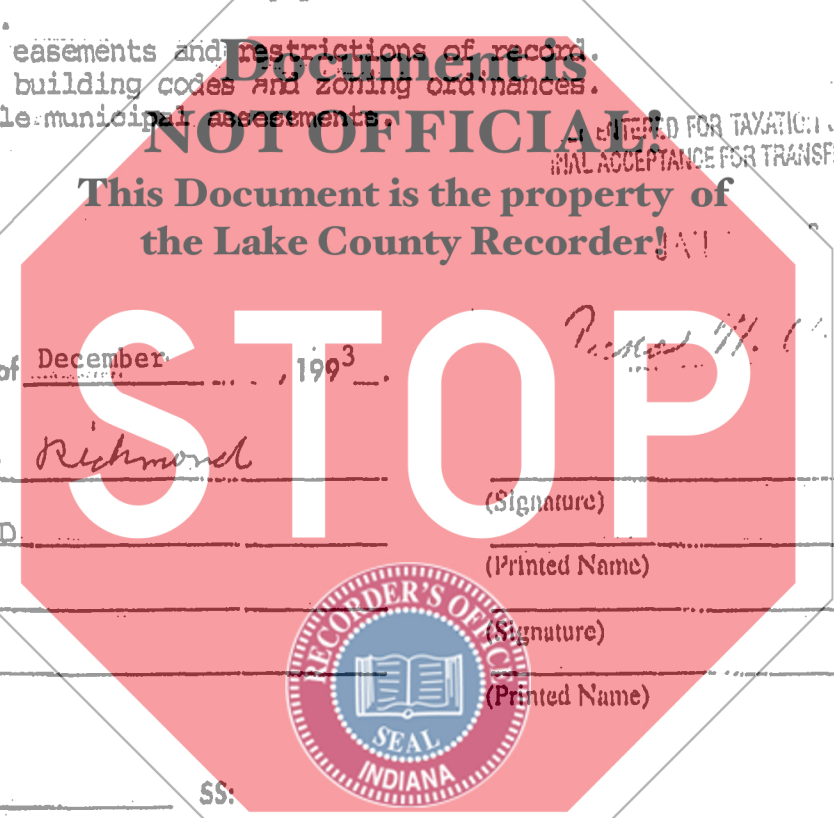
("Grantor") of Lake County in the State of Indiana
CONVEYS AND WARRANTS TO Blake E. Larson and Tori A. Larson, Husband and Wife
John F. Sako and Patricia A. Sako, Husband and Wife

of Lake County in the State of Indiana
in consideration of One Dollar and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the following described real estate in: Lake County, in the State of Indiana:

Lot 1 and the North 1/2 of Lot 3, Block 7, Stockyards Addition to Tolleston, in the City of Hobart, as shown in Plat Book 2, page 48, Lake County, Indiana. More commonly known as 3801 Alabama Street, Hobart, Indiana 46342.

SUBJECT, NEVERTHELESS, TO THE FOLLOWING:

1. Real estate taxes for 1992 payable 1993, and all real estate taxes thereafter.
2. Covenants, easements and restrictions of record.
3. Applicable building codes and zoning ordinances.
4. Any possible municipal assessments.



Dated this 29th day of December, 1993

Laneiva Richmond
(Signature) LANEIVA RICHMOND
(Printed Name)

(Signature)
(Printed Name)

(Signature)
(Printed Name)

(Signature)
(Printed Name)

STATE OF INDIANA
COUNTY OF Lake SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 29th day of December, personally appeared: LANEIVA RICHMOND

and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My Commission Expires: 12/08/95

Signature: Jacalyn L. Smith
Printed: Jacalyn L. Smith, Notary Public

STATE OF INDIANA
COUNTY OF _____ SS:

Before me, the undersigned, a Notary Public in and for said County and State, this _____ day of _____, 199____, personally appeared:

My commission expires: _____ Signature: _____
Resident of _____ County Printed _____, Notary Public

This instrument prepared by _____ 8585 Broadway, Suite 600, Merrillville, Indiana 46410 Attorney at Law
Attorney Identification No. 817-7065
MAIL TO:

00526 [Handwritten initials]