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Mail tax bills to: 94024259

227 Greiving Street  
Dyer, IN 46311

# WARRANTY DEED

Key No. 14-13-5

THIS INDENTURE WITNESSETH, That

\*\*\*\*\* ROBERT K. MIKULSKI and SANDRA L. MIKULSKI, husband and wife \*\*\*\*\*

("Grantor") of Lake County in the State of Indiana  
CONVEYS AND WARRANTS TO

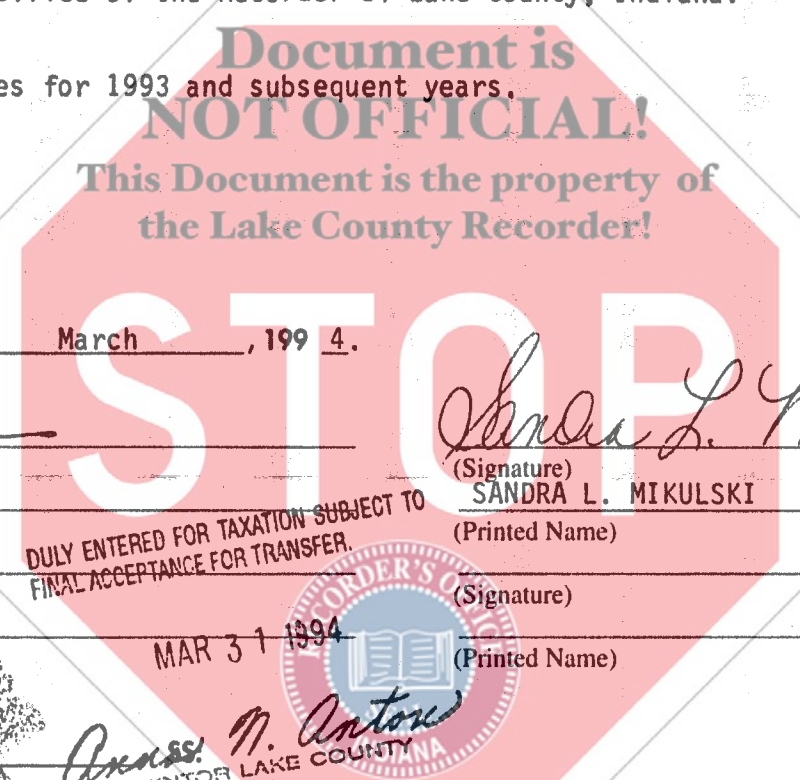
\*\*\*\*\* DAVID A. DWYER, JR. and DAWN G. DWYER, husband and wife \*\*\*\*\*

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 5 in Greiving Addition to Dyer, as per plat thereof, recorded in Plat Book 20, page 55, in the Office of the Recorder of Lake County, Indiana.

SUBJECT TO: Taxes for 1993 and subsequent years.



STATE OF INDIANA / S.S. NO. LAKE COUNTY FILED FOR RECORD  
MAR 31 2 23 PM '94  
SANDRA L. MIKULSKI  
RECORDER

Dated this 30th day of March, 1994.

*Robert K. Mikulski*  
(Signature)  
ROBERT K. MIKULSKI  
(Printed Name)

*Sandra L. Mikulski*  
(Signature)  
SANDRA L. MIKULSKI  
(Printed Name)

(Signature)  
(Printed Name)

(Signature)  
(Printed Name)

STATE OF INDIANA  
COUNTY OF LAKE

*Richard A. Zunica*  
AUDITOR LAKE COUNTY

Before me, the undersigned Notary Public in and for said County and State, this 30th day of March, 1994, personally appeared: ROBERT K. MIKULSKI and SANDRA L. MIKULSKI, Husband and wife

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 9-12-94 Signature *Richard A. Zunica*

Resident of Lake County Printed RICHARD A. ZUNICA, Notary Public

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_ SS:

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

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: \_\_\_\_\_ Signature \_\_\_\_\_

Resident of \_\_\_\_\_ County Printed \_\_\_\_\_, Notary Public

This instrument prepared by RICHARD A. ZUNICA, 162 Washington Street, Lowell, IN 43656 Attorney at Law  
Attorney Identification No. 1504-45

MAIL TO:

01929