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MAIL TAX BILLS TO: 94028779

~~4302 South Ross Road
Gary, IN 46408~~

QUITCLAIM DEED

7517 STARLING DR.
SCHERERVILLE IN 46375

THIS INDENTURE WITNESSETH, that JOSEPH ALEXICH,
("Grantor") of Lake County in the State of Indiana, QUITCLAIM(S) to JOSEPH ALEXICH
and STEVEN A. ALEXICH as JTWROS

of One Dollar (\$1.00) 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:

The North 220 feet of the East 1/2 of the Southwest 1/4 of the Southeast 1/4 of Section 25, Township 36 North, Range 9 West of the Second Principal Meridian excepting therefrom that part thereof lying Easterly of the center line of Ross Road containing, after said exception, 2.989 acres, more or less, in Lake County, Indiana. Key No. 39-47-53 & 55.

Commonly known as: 4302 South Ross Road, Gary, Indiana 46408.

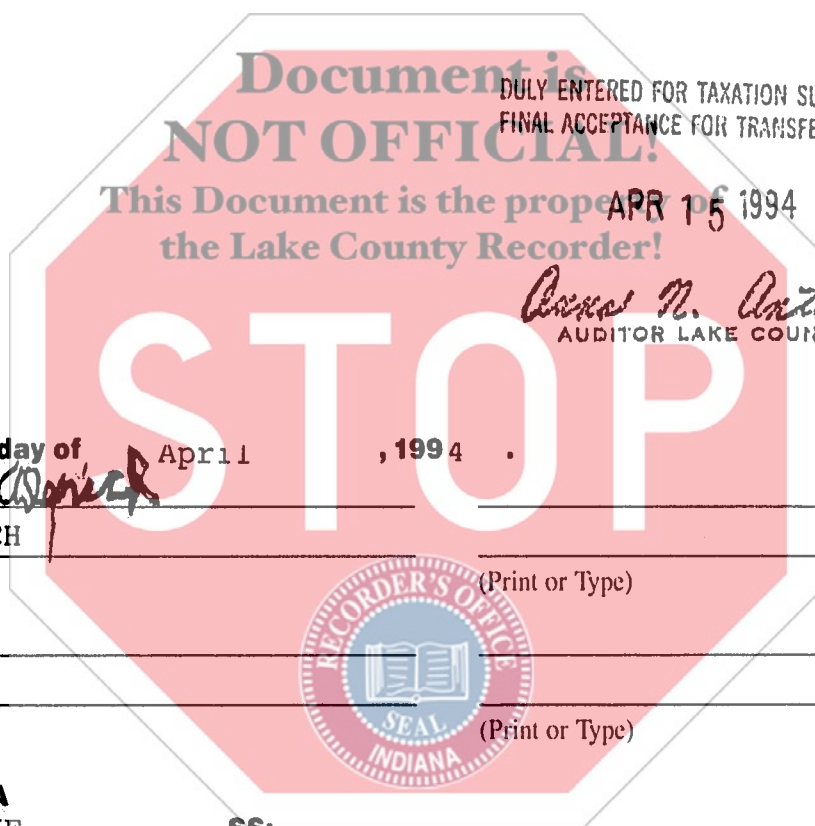
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
APR 15 1994
S.A. RECORDED

Document is NOT OFFICIAL!

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER.

This Document is the property of the Lake County Recorder! APR 15 1994

Alan F. Orth
AUDITOR LAKE COUNTY



Dated this 14 day of April, 1994

JOSEPH ALEXICH

(Print or Type)

(Print or Type)

(Print or Type)

(Print or Type)

STATE OF INDIANA
COUNTY OF LAKE

SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 14 day of April, 1994, personally appeared: JOSEPH ALEXICH 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: 9-1-94
Resident of LAKE County

Signature *Alan F. Orth*
Printed ALAN F. ORTH, 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: _____
Resident of _____ County

Signature _____
Printed _____, Notary Public

This instrument prepared by BARTEL ZANDSTRA, 3235 - 45th, Highland, IN 46322 Attorney at Law
Attorney Identification No. 1464-45

MAIL TO:

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