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Mail tax bills to:

48 Roselawn Street  
Hammond, Indiana 46324

# WARRANTY DEED

THIS INDENTURE WITNESSETH, That MARK A. ECHTERLING

("Grantor") of LAKE County in the State of INDIANA  
CONVEYS AND WARRANTS TO JOHN H. LLOYD IV and MARGARET M. LLOYD, 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 23 in Roselawn Park Addition to Hammond, as per plat thereof, recorded in Plat Book 16 page 36, in the Office of the Recorder of Lake County, Indiana.

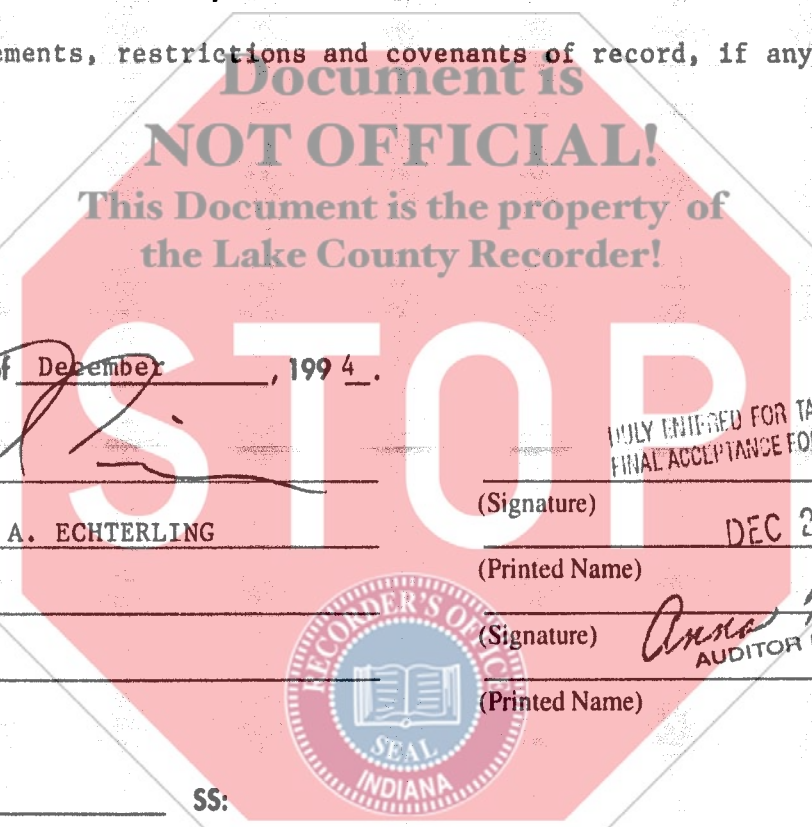
Commonly known as: 48 Roselawn Street, Hammond, Indiana 46324

Key No. 26-35-332-23

Subject to past and current year real estate taxes.

Subject to easements, restrictions and covenants of record, if any.

94086259



Dated this 20th day of December, 1994.

(Signature) [Signature]  
(Printed Name) MARK A. ECHTERLING

(Signature) \_\_\_\_\_  
(Printed Name) \_\_\_\_\_

(Signature) \_\_\_\_\_  
(Printed Name) \_\_\_\_\_

(Signature) [Signature]  
(Printed Name) \_\_\_\_\_

FILED FOR RECORD  
LAKE COUNTY  
INDIANA  
94 DEC 23 AM 9:30  
SAMUEL ORL  
RECORDER  
DEC 22 1994  
AUDITOR LAKE COUNTY

STATE OF INDIANA  
COUNTY OF LAKE SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 20th day of December, 1994, personally appeared: MARK A. ECHTERLING

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: JUNE 7, 1996 Signature [Signature]

Resident of LAKE County Printed THOMAS G. SCHILLER 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 Robert B. Leopold; 8242 Calumet Ave.; Munster, IN 46321 Attorney at Law  
Attorney Identification No. 8767-45

MAIL TO:

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