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Mail tax bills to:
427 Langen
Lowell, IN 46356

Key No. 4-177-7

WARRANTY DEED

THIS INDENTURE WITNESSETH, That

***** DARREN L. THOMPSON and LAURA J. THOMPSON, husband and wife *****

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

***** SCOTT J. KOCZUR and LISA A. KOCZUR, 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 38, Indian Heights 11th Addition to the Town of Lowell, as shown in Plat Book 56, page 20, in Lake County, Indiana.

SUBJECT TO: Taxes for 1994 and subsequent years, building lines, easements, covenants and restrictions.

Also subject to mortgage by Darren L. Thompson and Laura J. Thompson dated November 13, 1992, and recorded November 17, 1992, as Document No. 92073002 which the Grantees assume and agree to pay.

This Document is the property of the Lake County Recorder!

94087575

Dated this 21st day of December, 1994.

Darren L. Thompson
(Signature)
DARREN L. THOMPSON
(Printed Name)

Laura J. Thompson
(Signature)
LAURA J. THOMPSON
(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 21st day of December, 1994, personally appeared: DARREN L. THOMPSON and LAURA J. THOMPSON, husband and wife

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

My commission expires: 3-5-95 Signature Vincent Zunica
Resident of Indian Lake County Printed VINCENT 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 46356 Attorney at Law
Attorney Identification No. 1504-45

MAIL TO:

001743
10.00