THE PORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. THE SELECTION OF A PORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS, AND INSERTION OF SPECIAL CLAUSES, MAY CONSTITUTE THE PRACTICE OF LAW WHICH SHOULD ONLY BE BONE BY A LAWYER.

Mail tax bills to: 613 East 52nd Place Gary, Indiana 46409

TRUSTEES DEED

THIS INDENTURE WITNESSETH, That

SOPHIE BUCZEK A WIDOW AND NOT REMARRIED, AS TRUSTEE OF THE SOPHIE BUCZEK LIVING TRUST, DATED OCTOBER 20, 1994

("Grantor") of	IAKE
CONVEYS	AND	WARRANTS TO

County in the State of

INDIANA

BERNETTA WEST AND SARAH WEST, JOINT TENANTS WITH RIGHTS OF

SURVIVORSHIP

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 County, in the State of Indiana: LAKE

OF GARY, AS PER PL	IN MEADOWLAND MANO AT THEREOF, RECORDE N THE OFFICE OF THE 613 East 52nd Pla	D JANUARY 14 RECORDER OF	, 1957 IN PLAT	1	95003473
Commonly known as:	Gary, Indiana				
亨별 and penalty, if an		FFIC Ind covenants nt is the pr	e and payable A L of record, i coperty of	h delinquency thereafter. f any	
Dated this 16th day of	the Lake C		DUIV ENTURED SO	DEP. RECO	FOR RECO
(Signature)	a prester	(Signatu	THE ACCEPTANCE FOR	TRANSFER. 35	2
Sophie Buczek, As Tru (Printed Name)	SLEE	(Printed			
(Signature)		Stame	ire) 17(YOUNTY	
(Printed Name)		Printed	Name)	7.07.	
STATE OF INDIANA COUNTY OFLake	SS:	WOIANA			_
Before me, the undersigned, a Nota personally appeared: Sophie B	ry Public in and for said Col suczek, As Trustee	unty and State, thi	16th day of	January	, 1995,
of the foregoing deed. In witness w	•	./ .	<i>X </i>	and acknowledg	ed the execution
My commission expires:			PATRICIA LUI	UNITON "	
Resident of OTAR STATE OF COUNTY OF	County	Printed	NOTARY PL VIALE OF IN LAKE COU MY COMMISSION EX	IBLIC DIANA NTY	_, Notary Public
Before me, the undersigned, a Nota personally appeared:		ounty and State, thi	isday of		
of the foregoing deed. In witness w	hereof, I have hereunto subj	scribed my name s	and affixed my officia		ed the execution
My commission expires:		Signature			
Resident of	County	Printed			_, Notary Public
This instrument prepared by Patr	rick McManama 5265 Commo	rce Drive. Sult	a E Crown Point, I	n 46307	Attorney at Law
Attorney Identification No. <u>953/</u> MAIL TO:	<u>-45 </u>			00078	200