

Chicago Title Insurance Company

COMMITMENT/POLICY NO.

Demotte State Bnk
P.O. Box 346
Jewell St., #6576

This affidavit for the confidential use of the Chicago Title Insurance Company - will assist in determining whether certain matters of record affect the title under consideration, or whether they relate to other persons whose names are similar to those of the owner or owners or former owners or prospective owners.

STATE OF INDIANA

S.S.# 310-62-2816

COUNTY OF

Barbara A. Herlitz, being duly sworn, upon oath state that I am the owner of the premises described in the application hereinabove referred to for

insurance of Guarantee Policy or Policies. I am 40 years of age. Affiant further states the following under oath:

1. A. HAVE YOU EVER BEEN MARRIED? Yes (✓) No () If the answer is Yes please complete Item B.

B. I was married to Dennis H. Herlitz in the year 1993.

2. HAVE YOU EVER BEEN WIDOWED? Yes () No (✓) If the answer is Yes please list the name of your former spouse

3. HAVE YOU EVER BEEN A PARTY TO A DIVORCE PROCEEDING? Yes (✓) No () If the answer is Yes please complete Item B.

B. I was divorced from Rex E Bennett II in 1992 in Lake, IN

I was divorced from _____ in 19__ in _____ Case No. Co. State

4. HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAME? Yes () No (✓) If the answer is Yes please complete Items B and C if applicable.

B. I have been known by the name of Barbara A. Tobin (b) A. Bennett the Lake County Recorder!

C. I changed my name from _____ to _____ in _____ 19__ Case No. County State

5. A. HAVE YOU EVER BEEN ADJUDGED A BANKRUPT? Yes () No (✓) If the answer is Yes please complete Item B.

B. I was adjudged a bankrupt in Case No. _____ in 19__

6. ARE YOU SUBJECT TO ANY UNSATISFIED OR UNRELEASED JUDGMENTS, DECREES, FEDERAL OR STATE TAX LIENS, PERSONAL PROPERTY TAX LIENS OR OTHER LIENS OF RECORD IN LAKE COUNTY, INDIANA?

Yes () No (✓) If the answer is Yes please list them below:

7. PLEASE LIST ALL THE ADDRESSES AT WHICH YOU HAVE RESIDED IN THE LAST TEN (10) YEARS:

9320 N 900 W DEMOTTE, IN 46310
12628 ALEXANDER ST CEDAR LAKE, IN 46303

8. PLEASE LIST ALL PLACES OF EMPLOYMENT AND ADDRESSES FOR SAME FOR THE LAST 10 YEARS.

ST ANTHONY MEDICAL CENTER Crown Point, IN.

I understand that this affidavit is for the purpose of inducing the Chicago Title Insurance Company to issue its Title Insurance Policy or Commitment free and clear of all judgments, decrees, Federal tax liens, State tax liens, bankruptcy, divorce and change of name and any other proceedings against persons whose names are the same as mine or similar thereto.

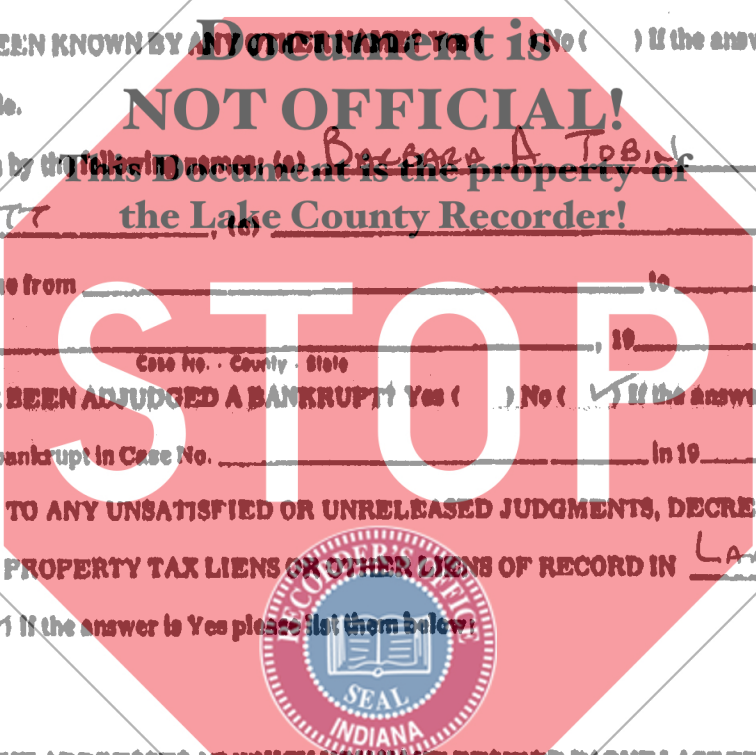
Barbara A. Herlitz

Subscribed and sworn to before me by the said Barbara A. Herlitz this 18th day of January 1995

My Commission expires 9/25/95

Bonnie L. Lesniowski

Notary Public Bonnie L. Lesniowski
Resident of NEWTON County



MARGARETTEN CLEVELAND
LIVE CENTER
004812
STATE OF INDIANA
LAKE COUNTY
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