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Mail tax bills to:

5518 Connecticut Street
Merrillville, IN 46410

WARRANTY DEED

THIS INDENTURE WITNESSETH, That

ALAN D. LIPP AND WINONA M. LIPP
HUSBAND AND WIFE

("Grantor") of LAKE County in the State of INDIANA
CONVEYS AND WARRANTS TO CARL J. ROSS

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:

LOTS 13,14 IN BLOCK 4 IN GROSSE POINTE, AS PER PLAT THEREOF, RECORDED APRIL 2,1926 IN PLAT BOOK 19 PAGE 34, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

COMMONLY KNOWN AS: 5518 CONNECTICUT STREET
MERRILLVILLE, IN 46410

SUBJECT TO SPECIAL ASSESSMENTS, PAST AND CURRENT YEAR REAL ESTATE TAXES TOGETHER WITH DELINQUENCY AND PENALTY, IF ANY, AND ALL REAL ESTATE TAXES DUE AND PAYABLE THEREAFTER.

SUBJECT TO EASEMENTS, RESTRICTIONS AND COVENANTS OF RECORD, IF ANY.

KEY NO. 15-61-13

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COMMUNITY TITLE COMPANY
FILE NO. 210442

95031773

Filed this 1st day of June, 1995.

Alan D. Lipp
(Signature)
ALAN D. LIPP
(Printed Name)

Winona M. Lipp
(Signature)
WINONA M. LIPP
(Printed Name)

(Signature)
(Printed Name)

(Signature)
(Printed Name)



DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER
JUN 5 1995

STATE OF INDIANA
COUNTY OF LAKE SS:

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared: ALAN D. LIPP AND WINONA M. LIPP HUSBAND AND WIFE 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: 4/15/98 Signature *Patricia Ludington*
Resident of Lake County Printed Patricia Ludington, Notary Public

STATE OF INDIANA
COUNTY OF LAKE 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 Patrick J. McManama, PC. Attorney at Law
Attorney Identification No. 9534-45

MAIL TO:

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