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Mail tax bills to:

7623 Forest Ave.
Munster, IN 46321

WARRANTY DEED

THIS INDENTURE WITNESSETH, That

MARK H. SCHOOP AND LOIS J. SCHOOP,
HUSBAND AND WIFE

("Grantor") of LAKE E, County in the State of INDIANA
CONVEYS AND WARRANTS TO VICTOR LUNDBERG, III

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 37 in Block 1 in Broadmoor, in Munster, as per plat thereof, recorded in Plat Book 18 page 3, in the Office of the Recorder of Lake County, Indiana.

Commonly known as: 7623 Forest. Munster, IN 46321

Subject to past and current year real estate taxes.

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

Key No. 28-41-37

95032189

Document is NOT OFFICIAL!

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

This Document is the property of the Lake County Recorder!

JUN 7 1995

SAM ORLICH
AUDITOR LAKE COUNTY

Dated this 02nd day of June, 1995

Mark H. Schoop
(Signature)
MARK H. SCHOOP
(Printed Name)

Lois J. Schoop
(Signature)
LOIS J. SCHOOP
(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 02nd day of June, 1995, personally appeared:

Mark H. Schoop and Lois J. Schoop, 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: 10-17-98 Signature *Linda S. Wood*

Resident of LAKE County Printed LINDA S. WOOD, 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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