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Mail tax bills to: 110 S. California Street, Hobart, Indiana 46342

TICOR TITLE INSURANCE

P.O. Box 386
Portage, IN 46368

WARRANTY DEED

THIS INDENTURE WITNESSETH, That **BYRON O. BRINER, JR. and DAWN R. BRINER**
Husband and Wife

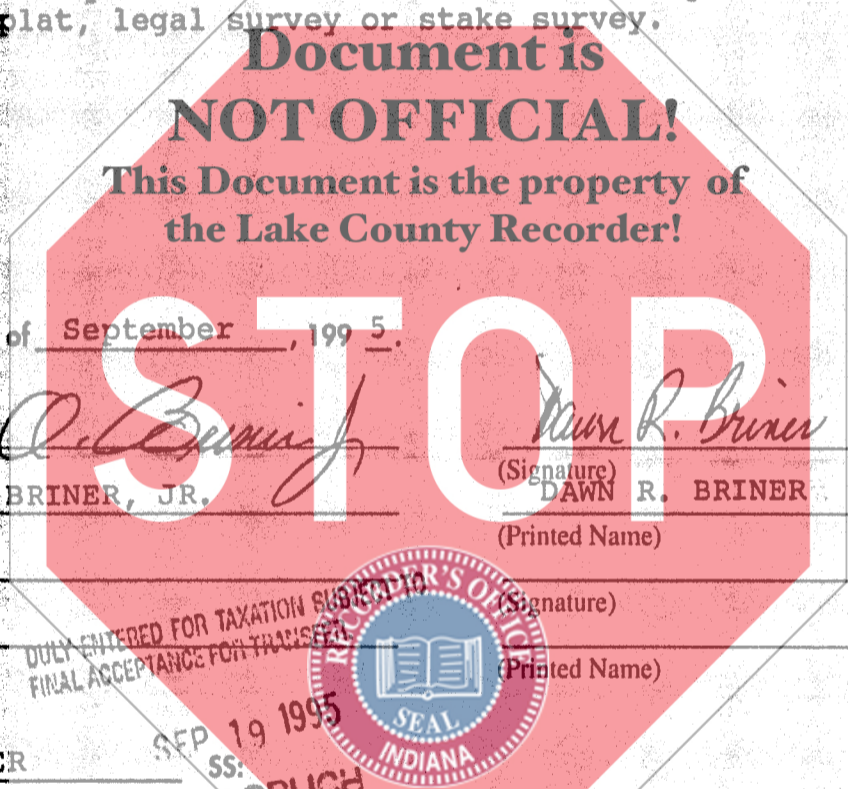
("Grantor") of Lake County in the State of Indiana
CONVEYS AND WARRANTS TO **DONALD L. SEDORIS and NANCY E. SEDORIS**
Husband and Wife

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:

Commonly known as 110 S. California Street, Hobart, Indiana
Lots 27 and 28 in Block 3 in Hobart Lake Shore Subdivision, in the
City of Hobart, as per plat thereof, recorded in Plat Book 21 page
9, in the Office of the Recorder of Lake County, Indiana.
27-18-22-27

Subject to existing taxes, easements, covenants and restrictions of record.

Subject to any statements of fact or description on a mortgage location plat, legal survey or stake survey.



Dated this 14th day of September, 1995.

Byron O. Briner, Jr.
(Signature) **BYRON O. BRINER, JR.**
(Printed Name)

Dawn R. Briner
(Signature) **DAWN R. BRINER**
(Printed Name)

(Signature)
(Printed Name)

(Signature)
(Printed Name)

STATE OF INDIANA
COUNTY OF PORTER

Before me, the undersigned, a Notary Public in and for said County and State, this 14th day of September, 1995, personally appeared: **BYRON O. BRINER, JR. and DAWN R. BRINER**

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: August 15, 1996 Signature *Charlene M. Ronk*
Resident of Porter County Printed Charlene M. Ronk Notary Public

STATE OF _____
COUNTY OF _____ SS:

Before me, the undersigned, a Notary Public in and for said County and State, this _____ day of _____, personally appeared:

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 JOHN M. RHAME, III, 2684 Willowcreek Road, Portage, Indiana Attorney at Law
Attorney Identification No. 6038-64
MAIL TO:

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