, Tich-M.O. 194877

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

Mail tax bills to:

2560 Orange Street Lake Station, IN 46405

WARRANTY DEED

THIS INDENTURE WITNESSETH, That

Ronald R. Wyller

CONVEYS AND WARRANTS TO			haron T. Kennedy,		
of Lake in consideration of One Dollar a following described real estate in	County in the State and other valuable consider Lake	ation, the re	Ind1 ceipt and sufficiency of unty, in the State of India	which are hereby ack	nowledged, the
Greater Riverview	North 10 feet ther Park Addition to Ea age 7, in the Office	ast Gary,	as per plat ther	eof, recorded	•
Key No. 20-38-33 a	ind 34.				
Subject to real eat thereafter.	state taxes for 1995	, due an	d payable in 1996	, and	
Subject to all covers record.	venants, conditions	u <mark>line</mark> 1	restrictions and	easements of	
	NOTO)FFI	CIAL!		
	This Docume the Lake C		Recorder!		9505
Dated this 14th day of	September , 199 5		PULY ENTERED I FINAL ACCEPTANCE	ON TAXATION SUBJECT TO	6454
(Signature) Ronald R. Wyll			Signature)	10 1000	
(Printed Name)			Printed MUDITOR	DRLIC	
(Signature)	N. E	STORK'S O	Printed Mayo TOR 1	KE COUNTY &	39 7
(Printed Name)			rinted Name)		E US
STATE OF INDIANA COUNTY OF Lake	SS:	MOIANA			
Before me, the undersigned, a No personally appeared: Ronald		ounty and St	ate, this <u>14th</u> day of	September 5	(5, 199 <mark>5</mark>)
of the foregoing deed. In witness		oscribed my	name and affixed my offi	and acknowledge ciał seal.	d the execution 3
My commission expires:Janu	nary 26, 1999	Signature	Birda	Morred	
Resident of Lake	County	Printed	Linda J. McBrid	<u>e</u>	, Notary Public
STATE OF	SS:				
Before me, the undersigned, a No personally appeared:	tary Public in and for said Co	ounty and St	ate, thisday of		
of the foregoing deed. In witness	whereof, I have hereunto sub	oscribed my i	name and affixed my offi	and acknowledge cial seal.	a the execution
My commission expires:		Signature			
Resident of	County	Printed			, Notary Public
This instrument prepared by Attorney Identification No. MAIL TO:	k Lucas, Lucas, Hol	ton Cour	t, Merrillville,	h DriveA IN 46410	