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Mail tax bills to:

8511 Moraine Avenue
Munster, Indiana 46321

WARRANTY DEED

THIS INDENTURE WITNESSETH, That **PATRICIA ANN BURGER**

("Grantor") of Lake County in the State of Indiana
CONVEYS AND WARRANTS TO **ROBERT L. CONOVER AND SHARON C. CONOVER, 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:

The South 5 feet of Lot 11 and the North 65 feet of Lot 12 in Block 2 in Knickerbocker Manor 2nd Addition to the Town of Munster, as per plat thereof, recorded in Plat Book 31, Page 75, in the Office of the Recorder of Lake County, Indiana.

18-28-177-12

Commonly Known As: 8511 Moraine Avenue
Munster, Indiana 46321

TICOR TITLE INSURANCE
Crown Point, Indiana
195626

95057061

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER.



STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
95 SEP 22 AM 9:46
MARGARETTE CLEVELAND
RECORDER

Dated this 15th day of September, 1995.

(Signature) Patricia Ann Burger (Signature) Patricia Ann Burger
(Printed Name) PATRICIA ANN BURGER (Printed Name) _____
(Signature) _____ (Signature) _____
(Printed Name) _____ (Printed Name) _____

STATE OF INDIANA
COUNTY OF Lake SS: _____

Before me, the undersigned, a Notary Public in and for said County and State, this 15th day of SEPTEMBER, 1995, personally appeared: **PATRICIA ANN BURGER** 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: 3/4/97 Signature Karen M. Sulek
Resident of LAKE County Printed KAREN M. SULEK 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 Randy H. Wyllie, 9013 Indianapolis Blvd., Highland, IN 46322 Attorney at Law
Attorney Identification No. 17621-64

MAIL TO:

001355

10/17