Ticor-M.O.

THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPAC TRIKING 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:

4457 Colfax Street Gary, IN 46408

QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that Jeffrey D. Boender and Shelley R. Boender

GRA	NTOR(S)	of
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GRANTEES(S) of

Lake

Lake

County in the State of

Indiana

QUITCLAIM(S) to Jeffrey D. Boender and Shelley R. Boender, husband and wife

County in the State of

Indiana

in consideration of One Dollar (\$1.00) and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the following described real estate in County, in the State of Indiana;

The North 153.69 feet of South 384.24 feet of West 283.42 feet of the Southwest 1/4 of the Southwest 1/4 of Section 25, Township 36 North, Range 9 West of the 2nd Principal Meridian, in Lake County, Indiana. Key No. 39-46-33. Document is NOT OFFICIALLY ENTERED FOR TAXATION SUBJECT TO This Document is the proper COFFTANCE FOR TRANSFER. the Lake County Recorder! SAM ORLICH AUDITOR LAKE COUNTY (Signature) (Signature) (Printed Name) Printed Name) (Signature) (Signature) (Printed Name) (Printed Name) STATE OF INDIANA Lake COUNTY OF__ Before me, the undersigned, a Notary Public in and for said County and State, this __10th day of__ personally appeared: Jeffrey D. Boender and Shelley R. Boender and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affiled my official sea My commission expires: October 2, 1997 Signature Paula Barrick Resident of _ County Printed. , Notary Public STATE OF COUNTY OF. Before me, the undersigned, a Notary Public in and for said County and State, this____ ___day of_ 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 __

__ County Printed _

This instrument prepared by Mark Lucas, Lucas, Holcomb & Medrea, 300 E. 90th Dr.,

MAIL TO:

Resident of _

Attorney Identification No. _

Easton Court, Merrillville, IN 46410

, Notary Public

_Attorney at Law