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Key #16-93-11,12,13

Mail tax bills to:
3517 Illinois St.
Lake Station IN 46405

WARRANTY DEED

THIS INDENTURE WITNESSETH, That FRANCISCO OCHOA and ISABEL OSCHOA,
Husband and Wife

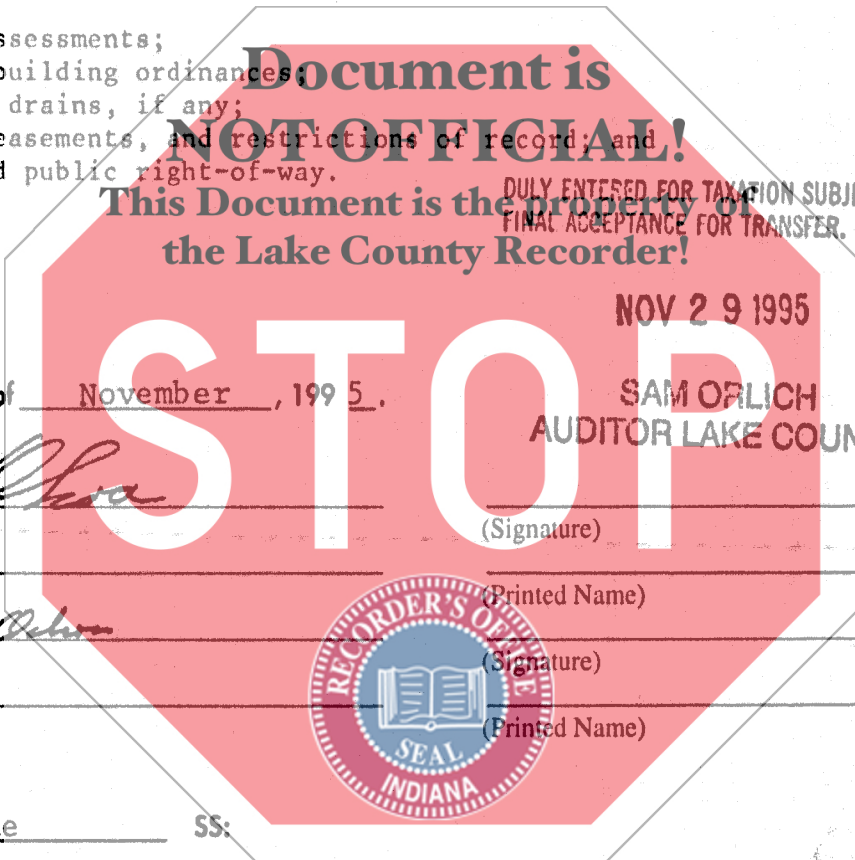
("Grantor") of Lake County in the State of Indiana
CONVEYS AND WARRANTS TO RUBY MEDELLIN

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:

Lots 50, 51 and 52, Block 4, in Godair Park Subdivision, as shown in Plat Book 8, Page 27, in Lake County, Indiana, and more commonly known as 3517 Illinois Street, Gary, Indiana 46409.

SUBJECT TO:

1. Taxes and assessments;
2. Zoning and building ordinances;
3. Ditches and drains, if any;
4. Covenants, easements, and restrictions of record; and
5. Highways and public right-of-way.



95073057

Dated this 21 day of November, 1995.

NOV 29 1995

SAM ORLICH
AUDITOR LAKE COUNTY

Francisco Ochoa
(Signature)
FRANCISCO OCHOA
(Printed Name)

[Signature]
(Signature)
(Printed Name)

Isabel Ochoa
(Signature)
ISABEL OCHOA
(Printed Name)

[Signature]
(Signature)
(Printed Name)

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
95 NOV 30 PM 1:30
MARSHALLE CLEVELAND
RECORDER

STATE OF INDIANA
COUNTY OF Lake SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 21 day of November, 1995, personally appeared: Francisco Ochoa and Isabel Ochoa, 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: 12-17-97 Signature *[Signature]*
Resident of Porter County Printed Roberta S. Tate 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 Timothy S. Schafer, 5875 Broadway, Merrillville, IN 46410 Attorney at Law
Attorney Identification No. 59-45

MAIL TO:

001654
K
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CT

Chicago Tide Insurance Company