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Mail tax bills to:
4270 Park Place
Crown Point, IN 46307

Key No. 10-48-18

WARRANTY DEED

THIS INDENTURE WITNESSETH, That

***** MILTON R. WHITTEN and MARCELLA H. WHITTEN, husband and wife *****

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

***** MICHAEL J. MORGAN *****

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:

Lot 210, Lakes of the Four Seasons, Unit No. 4, as shown on plat in Plat Book 38, page 3, in the Recorder's Office in Lake County, Indiana.

SUBJECT TO: Taxes for 1995 and subsequent years, building lines, easements, covenants and restrictions.

INDIANA TITLE SERVICES, INC.
162 Washington Street
Lowell, Indiana 46356
765-0727 or 608-0100

96013457

Dated this 28th day of February, 1996.

Milton R. Whitten
(Signature) MILTON R. WHITTEN
(Printed Name)

Marcella H. Whitten
(Signature) MARCELLA H. WHITTEN
(Printed Name)

(Signature) _____
(Printed Name)

(Signature) _____
(Printed Name)

STATE OF INDIANA
COUNTY OF LAKE

DULY ENTERED FOR TAXATION PURPOSES
- TRAIL ALREADY ENTERED FOR TAXATION PURPOSES -

FEB 29 1996

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
MARGARET J. ZUNIGA
RECORDER
96 FEB 29 PM 1:35

Before me, the undersigned, a Notary Public in and for said County and State, this 28th day of February, 1996, personally appeared: MILTON R. WHITTEN and MARCELLA H. WHITTEN, 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: 9-12-98 Signature [Signature]
Resident of Lake County Printed RICHARD A. ZUNICA, 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 RICHARD A. ZUNICA, 162 Washington Street, Lowell, IN 46356 Attorney at Law
Attorney Identification No. 1504-45

MAIL TO:

001593 10.00
[Signature]