Mail tax bills to: 4939 Tod Avenue East Chicago, IN 46312

## WARRANTY DEED

THIS INDENTURE WITNESSETH, That

**GILBERTO LOPEZ** 

("Grantor") of LAKE **CONVEYS AND WARRANTS TO** 

County in the State of MANUEL A. RAMOS

INDIANA

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 County, in the State of Indiana:

Lots 19 and 20 in Block 1 in Subdivision of part of the Northeast 1/4 of Section 32, Township 37 North, Range 9 West of the 2nd Principal Meridian, in the City of East Chicago, as per plat thereof, recorded in Plat Book 2 page 11, in the Office of the Recorder of Lake County, Indiana.

Key No. 30-148-17

Commonly known as: 4939 Tod Avenue, East Chicago, IN 46312

Subject to: Building lines, Easements, Covenants and Restriction of Record. Also subject to 1995 payable 1996 Real Estate Taxes and all years thereafter.

## ocument is

This Document is the projux entered for TAXATION SUBJECT TO the Lake County RecolNAL ACCEPTANCE FOR TRANSFER.

Dated this 30th day of

APRIL

:AM UNLIC AUDITOR LAKE COUNTY

MAY 2

1996

(Signature)

GILBERTO LOPEZ

(Signature)

(Printed Name)

(Printed Name)

(Signature)

(Signature)

(Printed Name)

Printed Name)

STATE OF INDIANA

COUNTY OF LAKE

personally appeared: GILBERTO LOPEZ

Before me, the undersigned, a Notary Public in and for said County and State, this 30TH day of APRIL

and acknowledged the execution

of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official segli

My commission expires: 10–17–98

Signature \_\_\_\_

LAKE County Printed

LINDA S. WOOD

STATE OF

**COUNTY OF** 

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 \_\_\_\_\_

\_\_\_\_\_\_County Printed \_\_\_\_\_\_\_, Notary Public

This instrument prepared by \_\_\_\_\_\_ Attorney at Law

Attorney Identification No.

MAIL TO:

Resident of \_\_\_