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 SPACES, STRIKING 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: Key No. 28-310-14 1331 Azalea Drive WARRANTY DEED Munster, IN 46321 THIS INDENTURE WITNESSETH, That ***** MITCHELL D. APPELSIES and CYNTHIA L. APPELSIES, husband and wife ("Grantor") of County in the State of Indiana Lake CONVEYS AND WARRANTS TO ***** THOMAS A. MONTELLA and KATHRYN M. MONTELLA, husband and wife *** of 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: Lake Lot 14 in Fairmeadow 18th Addition to the Town of Munster, as per plat thereof, recorded in Plat Book 40, page 96, in the Office of the Recorder of Lake County. Indiana. Taxes for 1995 and 1995 and subsequent years, building lines This Document is the property of building lines and easements. the Lake County Recorder! Dated this 26th day of March (Signature MITCHELL D. APPELSIES (Printed NaDNLY ENTERED FOR TAXATION SUBJECT (Printed Name) FINAL ACCEPTANCE FOR TRANSFER. (Signature) (Signature) (Printed Name) (Printed Name) SAM ORLICH STATE OF INDIANA COUNTY OF LAKE **AUDITOR LAKE COUNTY** Before me, the undersigned, a Notary Public in and for said County and State, this 26th day of personally appeared: MITCHELL D. APPELSIES and CYNTHIA L. APPELSIES, 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. 9-12-98 My commission expires: _ Signature County Printed RICHARD A. ZUNICA Resident of _ , Notary Public STATE OF SS: **COUNTY OF** Before me, the undersigned, a Notary Public in and for said County and State, this _____day of __ personally appeared: 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 Resident of This instrument prepared by RICHARD A. ZUNICA, 162 Washington Street, Lowell, IN 46356 Attorney at Law

Attorney Identification No. 1504-45

MAIL TO:

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