

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:

4483 Kentucky Street
Gary, IN 46409

QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that Iris Yarbough, formerly Iris Spruill

GRANTOR(S) of Lake County in the State of Indiana

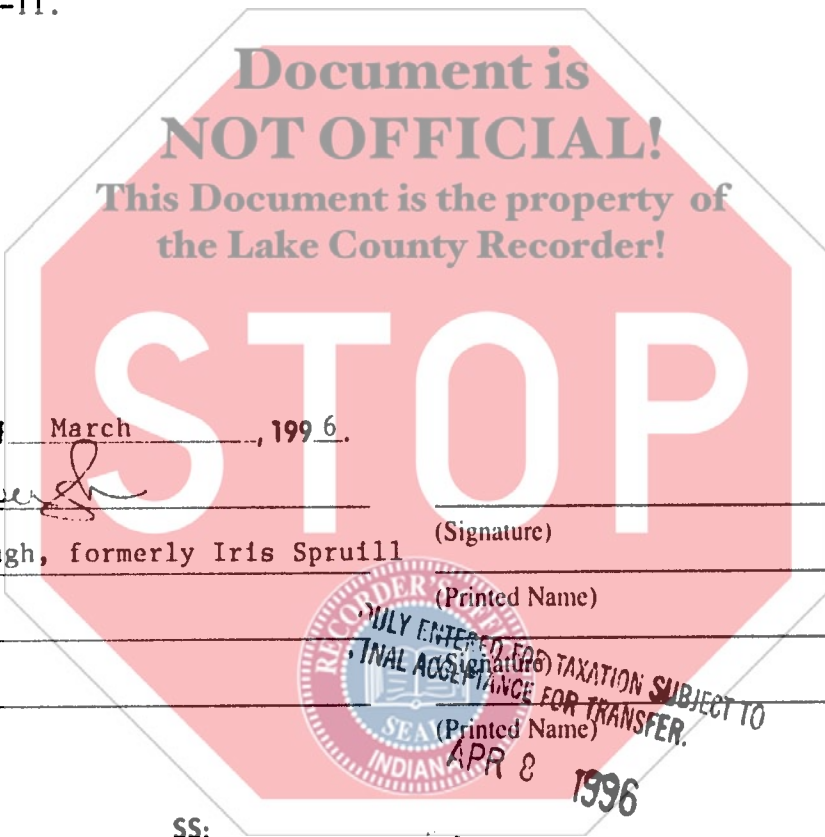
QUITCLAIM(S) to Iris Yarbough

GRANTEES(S) of Lake 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 Lake County, in the State of Indiana:

Lot 11 in Block 7 in Scarsdale First Addition to Gary, as per plat thereof, recorded in Plat Book 25 page 77, in the Office of the Recorder of Lake County, Indiana.

Key No. 47-141-11.

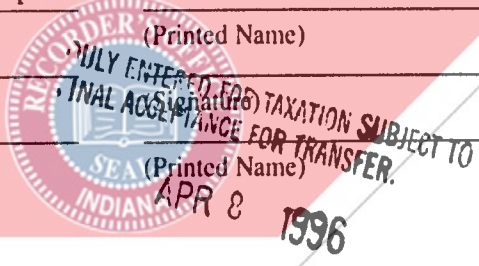


96022304

Dated this 28th day of March, 1996.

Iris Yarbough (Signature) Iris Yarbough, formerly Iris Spruill (Printed Name)

(Signature) _____ (Printed Name) _____
(Signature) _____ (Printed Name) _____



STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
96 APR -9 AM 9:52
MARGARET E. QUINN
RECORDER

STATE OF INDIANA
COUNTY OF Lake SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 28th day of March, 1996, personally appeared: Iris Yarbough, formerly Iris Spruill

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: October 2, 1997 Signature *Paula Barrick*
Resident of Lake County Printed Paula Barrick, 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 Mark Lucas, Lucas, Holcomb & Medrea, 300 E. 90th Drive, Attorney at Law
Attorney Identification No. _____ Easton Court, Merrillville, IN 46410

MAIL TO: