

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:

1204 W. CLEVELAND AVENUE
HOBART, INDIANA 46342
THIS INDENTURE WITNESSETH, That

WARRANTY DEED

SAMUEL G. HICKS

("Grantor") of LAKE
CONVEYS AND WARRANTS TO

County in the State of INDIANA
SHIRLEY A. STAPLES

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 19 IN BLOCK 14 IN COUNTRY CLUB ESTATES SUBDIVISION, IN THE CITY OF HOBART, AS PER PLAT THEREOF, RECORDED DECEMBER 13, 1926 IN PLAT BOOK 20, PAGE 41, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

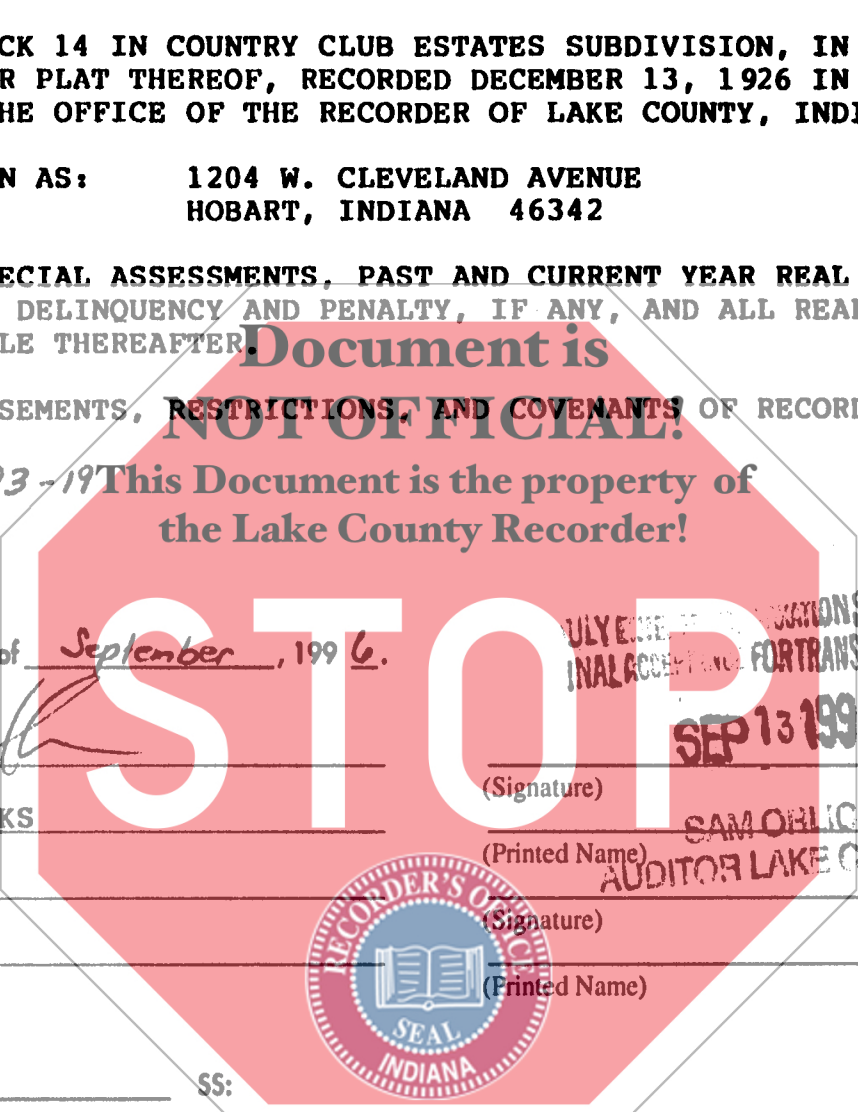
COMMONLY KNOWN AS: 1204 W. CLEVELAND AVENUE
HOBART, INDIANA 46342

SUBJECT TO SPECIAL ASSESSMENTS, PAST AND CURRENT YEAR REAL ESTATE TAXES TOGETHER WITH DELINQUENCY AND PENALTY, IF ANY, AND ALL REAL ESTATE TAXES DUE AND PAYABLE THEREAFTER.

SUBJECT TO EASEMENTS, RESTRICTIONS, AND COVENANTS OF RECORD, IF ANY.

Key # 17-93-19 This Document is the property of the Lake County Recorder!

COMMUNITY TITLE COMPANY
FILED 12/27/96



Dated this 6th day of September, 1996.

[Signature]
(Signature)
SAMUEL G. HICKS
(Printed Name)

[Signature]
(Signature)
SAMUEL G. HICKS
(Printed Name)

(Signature)
(Printed Name)

(Signature)
(Printed Name)

STATE OF INDIANA
COUNTY OF LAKE SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 6th day of September, 1996, personally appeared: SAMUEL G. HICKS

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 *[Signature]*

Resident of _____ County

Printed PATRICIA LUDINGTON
NOTARY PUBLIC
STATE OF INDIANA
LAKE COUNTY
MY COMMISSION EXPIRES 4/15/98

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 PATRICK J. McMANAMA, P.C. Attorney at Law
Attorney Identification No. 9534-45

MAIL TO:

000711 *[Signature]*