TI/HO 204763

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, STRIKINGOUT PROVISIONS, AND INSERTION OF SPECIAL CLAUSES, MAY CONSTITUTE THE PRACTICE OF LAW WHICH SHOULD ONLY BE DONE BY A LAWYER.

Mail tax bills to:

7829 BEECH AVE. HAMMOND, IN 46324

WARRANTY DEED

THIS INDENTURE WITNESSETH, That

MARY D. JAMROZ

("Grantor") of	LAKE	
CONVEYS	AND	WARRANTS	TO

County in the State of INDIANA

TIMOTHY D. MILLSAP

LAKE 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: LOT 20 IN BLOCK 1 IN BEVERLY SEVENTH ADDITION, IN THE CITY OF HAMMOND, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 29 PAGE 100, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA. KEY NO. 26-32-204-20 COMMONLY KNOWN AS: 7829 BEECH AVE., HAMMOND, IN 46324 SUBJECT TO PAST AND CURRENT YEAR REAL ESTATE TAXES. AND COVENANTS, TOP SRECORD, IF ANY. SUBJECT TO EASEMENTS, RESTRICTIONS This Document is the property of the Lake County Recorder! Dated this <u>IST</u> day of <u>OCTOBER</u> (Signature) (Signature) TAXATION SUBJECT ULY ENTERL UNAL ARCCORDINATE OR TRANSFER. (Printed Name) (Signature) (Printed Name) Printed Name) SAM ORLICH STATE OF INDIANA COUNTY OF LAKE Before me, the undersigned, a Notary Public in and for said County and State, this <u>1ST</u> day of <u>OCTOBER</u> personally appeared: MARY D. JAMROZ and acknowled of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal. My commission expires: 06-07-2000 Signature . County Printed THOMAS G. SCHILLER STATE OF **COUNTY OF** Before me, the undersigned, a Notary Public in and for said County and State, this _____day of personally appeared: and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal. Signature _____ My commission expires: ____County Printed _____ Notary Public Resident of _ This instrument prepared by __ROBERT B. LEOPOLD; 8242 CALUMET AVE.; MUNSTER, IN _219/922-9661 Attorney at Law Attorney Identification No. 8767-45 MAIL TO: