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Mail tax bills to:
1501 W. 97th Ave.
Crown Point, IN.

WARRANTY DEED

KEY NO. 54-52-66

NORTHWEST INDIANA TITLE SERVICES, INC
162 Washington Street
Lowell, Indiana 46356
769-6727 or 696-0100

THIS INDENTURE WITNESSETH, That

*** WILLIAM MATTHEW FIGLER AND MONICA SABO FIGLER, HUSBAND AND WIFE

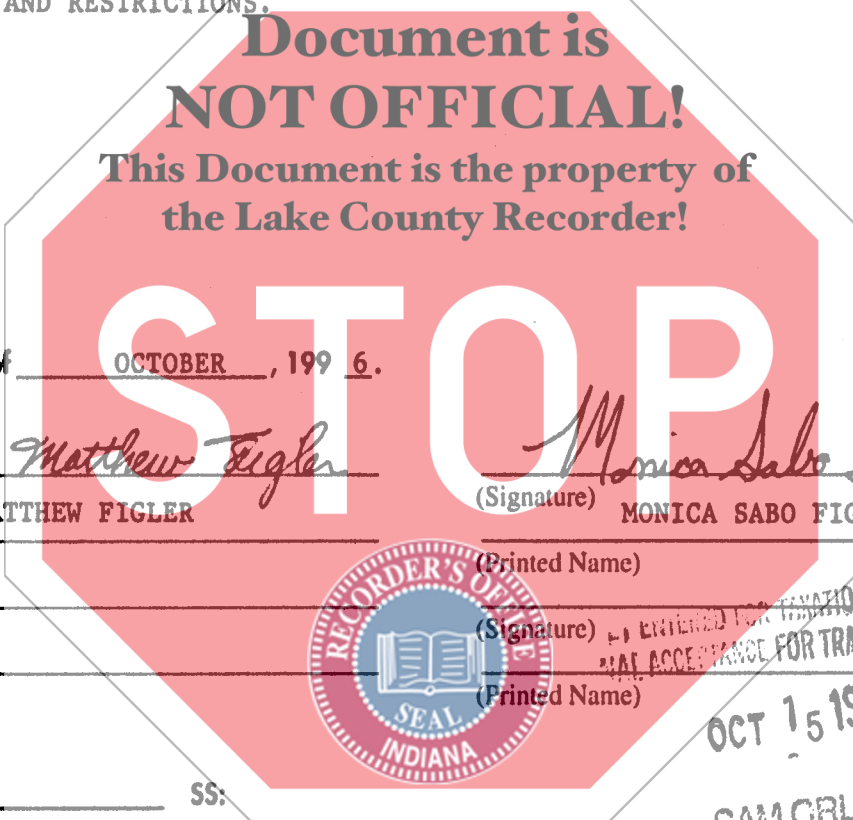
("Grantor") of LAKE County in the State of INDIANA
CONVEYS AND WARRANTS TO

*** MICHAEL J. SALIWONCZYK ***

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 66, Hidden Creek Estates to Lake County, Indiana as shown in Plat Book 76 page 7, Lake County, Indiana, and as amended in Plat Book 76 page 89 and as amended in Plat Book 77 page 11, and as amended in Plat Book 77 page 35, Lake County, Indiana.

SUBJECT TO: TAXES FOR 1996 AND SUBSEQUENT YEARS, BUILDING LINES, EASEMENTS, COVENANTS AND RESTRICTIONS.



96068359

Dated this 10TH day of OCTOBER, 1996.

William Matthew Figler
(Signature) WILLIAM MATTHEW FIGLER
(Printed Name)

Monica Sabo Figler
(Signature) MONICA SABO FIGLER
(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 10TH day of OCTOBER 1996 personally appeared: *** WILLIAM MATTHEW FIGLER AND MONICA SABO FIGLER, 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.

My commission expires: 9-12-98 Signature *[Signature]*
Resident of LAKE County Printed RICHARD A. ZUNICA, 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 RICHARD A. ZUNICA 162 WASHINGTON STREET, LOWELL, IN 46356 Attorney at Law
Attorney Identification No. 1504-45
MAIL TO:

000882
10.00
SM