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: 7409 Delaware Avenue Hammond, IN 46323

WARRANTY DEED

Key No. 35-399-15

THIS INDENTURE WITNESSETH, That

***** SCOTT JOHN HABENICHT and KRISTIE LEE HABENICHT, husband and wife ****

("Grantor") of Lake CONVEYS AND WARRANTS TO

MAIL TO:

County in the State of Indiana

**** DAVID B. KULCZYK ****

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 15, Parrish Avenue Third Addition to Hammond, as shown in Plat Book 29, page 48, in Lake County, Indiana. Document is SUBJECT TO: Taxes for 1996 and subsequent years, building lines, easements. This Document is the property of the Lake County Recorder! Dated this 30th day of January , 199 7. Do Joh Halank SCOTT JOHN HABENICHT - LNTERED FOR TAXATION SORginted Name) (Printed Name) NAL ACCEPTAGE FOR TRANSFER gnature) (Signature) FEB 5 (Printed Name) (Printed Name) STATE OF INDIANA SAM ORLICH COUNTY OF LAKE SS: ALIDITOR LAKE COLIN Before me, the undersigned, a Notary Public in and for said County and State, this 30th day of January 199 7, personally appeared: SCOTT JOHN HABENICHT and KRISTIE LEE HABENICHT, 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 Resident of _____ Lake ____ County Printed __ RICHARD A. ZUNICA _, Notary Public STATE OF COUNTY OF Before me, the undersigned, a Notary Public in and for said County and State, this _____day of ______, 199___ personally appeared: 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 RICHARD A. ZUNICA, 162 Washington Street, Lowell, IN 46356 Attorney at Law Attorney Identification No. 1504-45