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: 7650 W, 85th Avenue Crown Point, IN 46307

WARRANTY DEED

Key No. 11-175-8

THIS INDENTURE WITNESSETH, That

**** TIMOTHY W.	STEPHENS and SUSAN B, STEPHENS, husband and wife ****
("Grantor") of Lake CONVEYS AND WARRANTS TO	County in the State of Indiana
**** JAMES B. MI	ILLER and COLLEEN KIRBY-MILLER, husband and wife *****
of Lake in consideration of One Dollar and oth following described real estate in	County in the State of Indiana consideration, the receipt and sufficiency of which are hereby acknowledged, the Lake County, in the State of Indiana:
Lot 116 in Scherervill recorded in Plat Book Indiana.	le Heights Unit No. 2, Section No. 5, as per plat thereof, 38, page 42, in the Office of the Recorder of Lake County,
possible	r 1996 and subsequent years, building lines and easements, ditch and drain rights. NOT OFFICIAL! This Document is the property of the Lake County Recorder!
Dated this 4th day of February (Signature)	Susan Bettephense (Signature)
TIMOTHY W. STEPHENS (Printed Name)	LENIEF HOR TAXATION SUBJECT (Name)
(Signature) (Printed Name)	(Signature) S Si Si Christed Name)
STATE OF INDIANA COUNTY OF LAKE	SAM ORLICH STADITOR LAKE COLUMN
personally appeared: TIMOTHY W. S	blic in and for said County and State, this 4th day of February, 199 7. STEPHENS and SUSAN B. STEPHENS, husband and wife and acknowledged the execution
-	f, I have hereunto subscribed my name and affixed my official seal.
My commission expires: 9- Resident of Lake	County Printed Richard A. Zunica Notary Public
STATE OFCOUNTY OF	SS:
Before me, the undersigned, a Notary Pub personally appeared:	olic in and for said County and State, thisday of, 199,
	and acknowledged the execution

of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

Attorney Identification No. 1504-45

MAIL TO:

My commission expires: ______ Signature _____

Resident of _______, Notary Public

This instrument prepared by RICHARD A. ZUNICA, 162 Washington Street, Lowell, IN 46356 Attorney at Law

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