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Mail tax bills to:
4199 Thornhill Drive
Crown Point, IN 46307

Key No. 10-46-218

WARRANTY DEED

NORTHWEST INDIANA TITLE SERVICES, INC.
162 Washington Street
Lowell, Indiana 46356
789-0727 or 696-0100

THIS INDENTURE WITNESSETH, That

***** TRACEY ANNE BRILL *****

("Grantor") of Lake County in the State of Indiana
CONVEYS AND WARRANTS TO

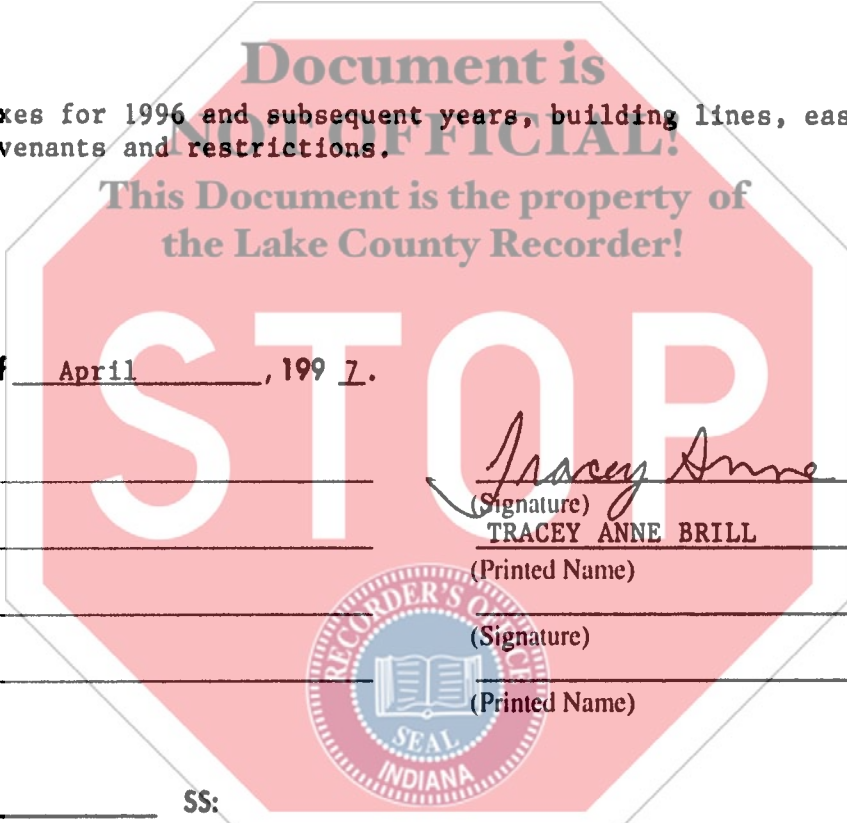
***** CHRISTOPHER W. MERRITT and KRISTEN F. SKOPEK *****

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 447, Lakes of the Four Seasons, Unit No. 2, as shown in Plat Book 37, page 76, in Lake County, Indiana.

SUBJECT TO: Taxes for 1996 and subsequent years, building lines, easements, covenants and restrictions.

This Document is the property of the Lake County Recorder!



Dated this 26th day of April, 1997.

(Signature)

(Signature)

TRACEY ANNE BRILL

(Printed Name)

(Printed Name)

(Signature)

(Signature)

(Printed Name)

(Printed Name)

STATE OF INDIANA
COUNTY OF LAKE SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 26th day of April, 1997, personally appeared: TRACEY ANNE BRILL

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, Indiana, Printed Richard A. Zunica, Notary Public

STATE OF _____
COUNTY OF _____ SS: APR 28 1997

Before me, the undersigned, a Notary Public in and for said County and State, this _____ day of _____, 199____, personally appeared: AUDITOR LAKE COUNTY

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:

001636

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SM