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:

10915 W. 133R AVE

## WARRANTY DEED

Celar tale In. THIS INDENTURE WITNESSETH, That

\*\*\*\*\* ROY M. LEWIS and EDNA R. LEWIS, husband and wife \*\*\*\*

("Grantor") of Lake **CONVEYS AND WARRANTS TO** 

County in the State of Indiana

\*\*\*\* FRANK PONZIANO \*\*\*\*

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 acknowledge. following described real estate in Lake County, in the State of Indiana:

Lots 5 and 6, Block 4, Riverside Addition to Hammond, as shown in Plat Book 2 page 92, in Lake County, Indiana.

SUBJECT TO: Taxes for 1996 and subsequent years, leases and sub-leases.

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER. This Document is the property the Lake County Record

SAM ORLICH , 199 7. **AUDITOR LAKE COUNT** 

(Signayore) ROY'M. LEWIS (Printed Name)

(Signature) EDNA R. LEWIS

(Printed Name)

(Signature)

(Signature)

(Printed Name)

(Printed Name)

STATE OF INDIANA COUNTY OF

LAKE

May , 199 7, Before me, the undersigned, a Notary Public in and for said County and State, this 30th day of \_\_\_\_ personally appeared: ROY M. LEWIS and EDNA R. LEWIS, husband and wife

and acknowledged the execution

Key No. 35-289-5 & 6

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 \_\_ 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 \_\_\_\_\_\_

\_\_\_\_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

MAIL TO:

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