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Mail tax bills to:

Deborah Baker
2432 Clay Street, Lake Station
THIS INDENTURE WITNESSETH, That IN 46405

WARRANTY DEED

Michael Delfine, as Trustee for the The Blair Family Trust pursuant to the authority vested in said Trustee in and by said agreement

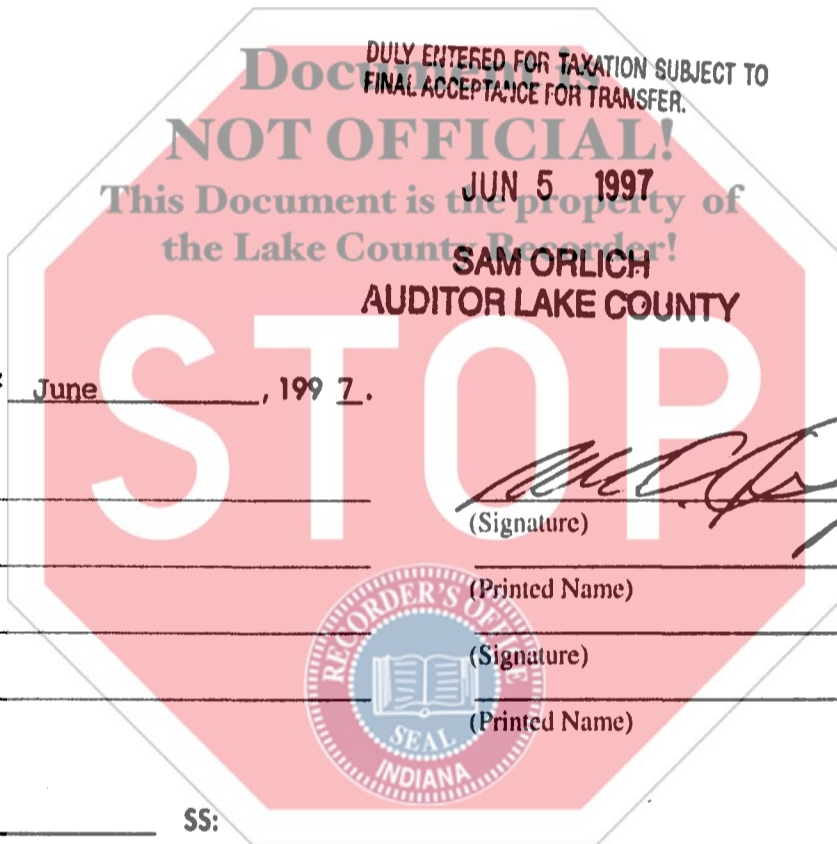
("Grantor") of Lake County in the State of Indiana
CONVEYS AND WARRANTS TO
Deborah M. Baker

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:

The South 4 feet of Lot 11 and the North 36 feet of Lot 12, Block 19, Junedale Subdivision, in the City of Gary, as shown in Plat Book 19, page 3, Lake County, Indiana.

KEY # 25-45-0183-0016

Subject to easements of highways, streets, alleys, sewers, tiles, drains, and public utilities.



97036091

Dated this 3rd day of June, 1997.

(Signature) _____ (Signature) _____

(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 3rd day of June, 1997, personally appeared:

Michael Delfine as Trustee for the Blair Family Trust 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: 1-21-99 Signature _____

Resident of Lake County Printed Douglas R. Kvachkoff, Notary Public

DOUGLAS R. KVACHKOFF
Notary Public, State of Indiana
Lake County
Commission Expires Jan. 21, 1999

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 Douglas R. Kvachkoff Attorney at Law
Attorney Identification No. 1100

MAIL TO: Indiana Title Network Company, 10971 Four Seasons Place, Crown Point, IN 46307

Our File No. 973486-01

Doc 091-108