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THIS FORTH 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.

A STATE OF THE STA

MAIL TAX BILLS TO:

This instrument prepared by ..

MAIL TO:

Attorney Identification No. 8616-45

333 Maple Lane Crown Point, IN 4630		TCLAI	M DE	RD	Key NO. 9-1	228-12	
	•		.VA AJEJI				
5	WITNESSETH, that	Alice J. Witt					
당 GRANTOR(S) of	Lake	County in the S	State of	Indiana			
QUITCLAIM(S) to	Alice J. Witt, Charl	les Witt, Jr. and	d Tamara S. !	Witt, joint tend	ants with righ	ts of survivorship	
GRANTOR(S) of QUITCLAIM(S) to CONTROL OF CON	Lake	County in the S	State of	Indiana			
in consideration of One I the following described in	Pollar (\$1.00) and other valueal estate in	nable consideration, .ake	, the receipt an County, in t	nd sufficiency of which the State of Indiana	hich are hereby a a:	acknowledged,	
	Mapleview 2nd Addition, in Lake County, Indiana		Crown Point,	as shown in Pla		970	
(Commonly known as: 333 Maple Lane, Crown Point, 1 LULY ENTERED FOR TAXATION SUBJEC. FINAL ACCEPTANCE FOR TRANSFER.				r)	97070665		
OC	T 1 6 1997						
16.4	M ORLICH R LAKE COUNT				V0		
Dated this 8th d	•	_, 199 <u>7</u> .			97 OCT MOSPS For	STATI LAI FILED	
(Signature) Alice J. Witt	J. Witt	***************************************	(Signature)		-	700	
Alice J. Witt (Printed Name)		((Printed Name	e)	- <u>- </u>	RESERVED TO THE RESERVED TO TH	
(Signature)			(Signature)		= 12	8	
(Printed Name)			(Printed Name	e)			
STATE OF INDIANA COUNTY OF	AKE ss:				O(00980	
Before me, the undersig personally appeared:	ned, a Notary Public in and Aliœ J. Witt	l for said County a	nd State, this .	8th day of	October .	, 199 <mark>7</mark> ,	
	witness whereof, I have h			affixed my officia			
Resident of	9-18-99 Coun	ty Printed	gnature Sa	Ballas	James	Notary Public	
	\$\$:	.,				,	
	ned, a Notary Public in and	l for said County ar	nd State, this_	day of	<u> </u>	, 199,	
of the foregoing deed. Ir	witness whereof, I have he	ercunto subscribed	my name and		nd acknowledge al seal.	d the execution	
My commission expires:		Si	gnature			W.J	
Resident of	Coun	ty Printed				. Notary Public (

Brian L. Goins, 707 Ridge Road, Munster, IN 46321

CFS, FSB 5311 Hohman Avenue, Hammond, IN 46320

_ Attorney at Law