JULY ENTERED FOR TAXATION SUBJECTIVAL ACCEPTANCE FOR TRANSFER.

OCT 23 1997

97073813

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

97 OCT 30 AM 10: 35

MORRIS W. CARTER RECOMMEN

SAM ORLICH AUDITOR LAKE COUNT

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.

6868 TYLER MERRILLVILLE, IN 46410	WAI	RRANT	Y DEED	
THIS INDENTURE WITNI			AND ELAINE M. THORSTEIN	SON,
("Grantor") of LAKE	County in the State		CONVEYS AND WARRAN	TS TO
the following described r LOT 471 AND THE SOUTH PER PLAT THEREOF REC COMMONLY KNOWN AS SUBJECT TO SPECIAL AS: ANY, AND ALL REAL ES	SCOTT SAAVEDRA AND County in County	MELISSA SAAV the State of posideration, the r C CREEK MEADOWS DOK 35 PAGE 108, I LVILLE, INDIANA 4 T YEAR REAL ESTA E THEREAFTER.	EDRA, HUSBAND AND WIFE NDIANA eccipt and sufficiency of whic ounty, in the State of Indiana: SUBDIVISION, UNIT NO. 7, IN THE TATE OF THE RECORDER 6410 ATE TAXES TOGETHER WITH DELI	h are hereby acknowledged, FOWN OF MERRILLVILLE, AS OF LAKE COUNTY, INDIANA.
SOBRET TO EMBERIENT	s, restrictions and covera		• • •	
Dated this day	of October, 1997		14201	,
(Signature), ORVILLE	THORSTEINSON	(;	Signature)	
DRUILLE Th	ORSTEINSON	_		
(Printed Name)	Insternan	(1	Printed Name)	
(Signature) ELAINE M	THORSTEINSON	(;	Signature)	
(Printed Name)			Printed Name)	
STATE OF INDIANA, CO	OUNTY OFLAKE		SS:	
personally appeared:	ORVILLE THORSTEINSO HUSBAND AND WIFE	N AND ELAINE	and affixed my official s	d acknowledged the execution
My commission expires:_	08/31/99	Signature	falquelini	Tunh
Resident of	Lake County	Printed	Jacqueline Ruark	, Notary Public
STATE OF	, COUNTY OF _		\$S:	
Before me, the undersigned personally appeared:	d, a Notary Public in and for s	said County and S	state, this day of	
of the foregoing deed. In w	vitness whereof, I have hereur	nto subscribed my	name and affixed my official s	d acknowledged the execution eal.
My commission expires:		Signature		
Resident of	County	Printed		, Notary Public
			NEY I.D. #: 9534-45	
	·y	······································		, Attorney at Law
MAIL TO:			(001404

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