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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: WARRANTY DEED **7511 JOHNSON STREET MERRILLVILLE, IN 46410** THIS INDENTURE WITNESSETH, That ROBERT C. SZPAK AND ALICE F. SZPAK, HUSBAND AND WIFE **HUSBAND AND WIFE** ("Grantor") of LAKE County in the State of INDIANA **CONVEYS AND WARRANTS TO** CORA ANN RUSHIER to the State of in consideration of One Dollar and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the following described real estate in County, in the State of Indiana: LOT 256 IN SAVANNAH RIDGE UNIT 6, IN THE TOWN OF MERRILLVILLE, AS PER PLAT THEREOF, RECORDED JUNE 2, 1988 IN PLAT BOOK 64 PAGE 15, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA. Key No. 15-560-25COMMONLY KNOWN AS: 7511 JOHNSON STREET, MERRILLVII.LE, INDIANA 46410 SUBJECT TO SPECIAL ASSESSMENTS, PAST AND CURRENT YEAR REAL ESTATE TAXES TOGETHER WITH DELINQUENCY AND PENALTY, IF ANY, AND ALL REAL ESTATE TAXES DUE AND PAYABLE THEREAFTER. SUBJECT TO EASEMENTS, RESTRICTIONS AND COVENANTS OF RECORD, IF ANY. 2 14217 (Signature) (Printed Name) (Printed Nan (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 November, 1997 personally appeared: ROBERT C. SZPAK AND ALICE F. SZPAK. 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: August 31, 1999 Signature Resident of Lake County // Jacqueline Ruark Printed ____ STATE OF ______, COUNTY OF _____ SS: 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. Signature ___ My commission expires: _____ County _____, Notary Public Printed _ Resident of _____

This instrument prepared by PATRICK J. MCMANAMA

MAIL TO:

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_____, Attorney at Law

ATTORNEY I.D. #: 9534-45