

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

97082542

97 DEC - 3 AM 10:00

MORNING CENTER

RETURN TO LAKE FEDERAL SAVINGS & LOAN, P. O. BOX 2277, HAMMOND, IN 46323

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: 6703 Rhode Island Avenue, Hammond, IN 46323

WARRANTY DEED

THIS INDENTURE WITNESSETH, That AL FERCONIO

("Grantor") of Lake County in the State of Indiana CONVEYS AND WARRANTS TO

LORRAINE SLIGA

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:

Lot 1 Block 9, Cline Gardens Addition in the City of Hammond, as shown in Plat Book 31, page 71, in Lake County, Indiana.

Commonly known as: 6703 Rhode Island Avenue, Hammond, Indiana 46323

SUBJECT TO UNPAID TAXES, IF ANY, EASEMENTS, COVENANTS, CONDITIONS AND RESTRICTIONS OF RECORD.

Key # 32-222-1

Dated this 25th day of November, 1997.

Al Ferconio

(Signature) AL FERCONIO

(Printed Name)

(Signature)

(Printed Name)

(Signature)

(Printed Name)

(Signature)

(Printed Name)

STATE OF INDIANA, COUNTY OF LAKE SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 25th day of November, 1997 personally appeared: AL FERCONIO

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: 1-13-1998 Signature *Diane M. Krieter*

Resident of LAKE County Printed Diane M. Krieter, Notary Public

DIANE M. KRIETER
NOTARY PUBLIC STATE OF INDIANA
LAKE COUNTY
MY COMMISSION EXP. JAN. 13, 1998

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.

My commission expires: _____ Signature _____

Resident of _____ County Printed _____, Notary Public

This instrument prepared by Gary K. Matthews, 142 Rimbach, Hammond, IN 46320 219-931-1700 Attorney at Law Attorney No. 9085-45

MAIL TO:

214/24

TICOR TITLE INSURANCE
Crown Point, Indiana

Return: Lake Federal

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NOT RECORDED FOR TAXATION SUBJECT

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