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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

97 DEC 19 PM 3:17

MORRIS W. CARTER
RECORDER

FILED FOR TAXATION SUBJECT
TAX ACCEPTANCE FOR TRANSFER

DEC 19 1997

SAM ORLICH
AUDITOR LAKE COUNTY

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:

Waldo S. Liechty,
Special Trustee
1359 S. Lake Park Ave.
Hobart, IN 46342

QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that Robert Lee Erickson and Phyllis Ann Erickson, fee simple owners.

GRANTOR(S) of Lake County in the State of Indiana

QUITCLAIM(S) to Robert L. and Phyllis A. Erickson Charitable Trust, Waldo S. Liechty, Special Trustee

GRANTEE(S) of County in the State of Indiana

In consideration of One Dollar (\$1.00) 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 East 1/2 of the Northwest 1/4 of Section 11, containing 80 acres, more or less, all being in Township 35 North, Range 8 West of the 2nd P.M. in Lake County, Indiana.

Except a portion of the NE 1/4 of the NW 1/4 of Section 11, Township 35 North, Range 8 West of the 2nd P.M., located in Ross Township, Lake County, Indiana to wit:

Beginning at a point on the North line of said Section, 600 feet West of the NE corner of the NW 1/4 of said Section; thence deflecting 90° 30' to the left and South from said section line 300 feet; thence West and parrallel to the North line of said Section 150 feet; thence deflecting 89° 30' to the right and North 300 feet to the North line of said Section; thence East along the North line of said Section 150 feet to the place of beginning, containing 1.03 acres more or less

Key: 53-7-3,6, 7 & part of 53-11-24

Dated this 19 day of December 1997

Phyllis Ann Erickson
(Signature)

Phyllis Ann Erickson

(Printed Name)

(Signature)

(Printed Name)

Robert Lee Erickson
(Signature)

Robert Lee Erickson

(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 19 day of December personally appeared: Robert Lee Erickson and Phyllis Ann Erickson

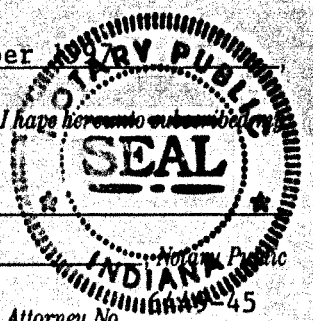
name and affixed my official seal.

My commission expires: 7-5-99

Resident of Lake County

Signature

Printed Patricia A. Rees



This instrument prepared by Patricia A. Rees P.O. Box 488, Hobart, IN 46342

Attorney at Law, Attorney No.

MAIL TO:

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UU1212
#23669