WARRANTY DEED

THIS INDENTURE WITNESSETH, That   KEVIN W. KOWALKE

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

Conveys And Warrants To   NEIL JILLSON, JR. AND ANGELA A. JILLSON, HUSBAND AND WIFE

of   **LAKE**   County in the State of   **INDIANA**   ,as **GRANTEE(S)**
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 1390 IN LAKES OF THE FOUR SEASONS, UNIT NO. 9, AS PER PLAT THEREOF, RECORDED MARCH 21, 1968 IN PLAT BOOK 38 PAGE 78, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

COMMONLY KNOWN AS: 4004 KINGSWAY DRIVE, CROWN POINT, IN 46307

SUBJECT TO SPECIAL ASSESSMENT, 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 EASEMENT, RESTRICTIONS AND COVENANTS OF RECORD, IF ANY.

Dated this _____16th_____ day of _____June_____ 19__98__

Name: **KEVIN W. KOWALKE**

Name: _____   Name: _____

Name: _____   Name: _____

STATE OF INDIANA, COUNTY OF _____LAKE_____ SS:

Before me, the undersigned, a Notary Public in and for said County and State, this __16th__ day of __June__ _____, 19__98__ personally appeared: **KEVIN W. KOWALKE**
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: __10/31/01__   Signature _Cynthia M. Washburn_

Resident of _____Lake_____ County   Printed __Cynthia M. Washburn__ Notary Public

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER.

JUN 25 1998

SAM ORLICH
AUDITOR LAKE COUNTY

STATE OF _____, **COUNTY OF** _____ SS:

Before me, the undersigned, a Notary Public in and for said County and State, _____, 19___ personally appeared:
acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

COMMUNITY TITLE COMPANY
FILE NO __X 15464__

My commission expires: _____   Signature _____

Resident of _____ County   Printed _____, Notary Public

This instrument prepared by: **PATRICK J. McMANAMA**, Attorney at Law
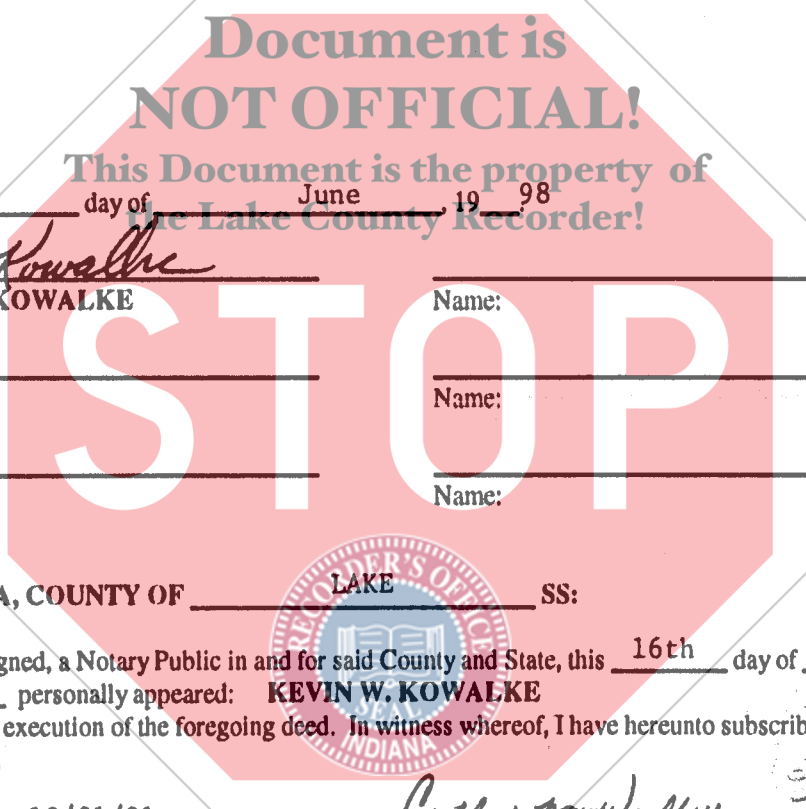Attorney I.D. No.: 9534-45

Return Deed To: **MR. & MRS. NEIL JILLSON, JR., 4004 KINGSWAY, CROWN POINT, IN 46307**
Name & Address
Send Tax Bills To: **MR. & MRS. NEIL JILLSON, JR., 4004 KINGSWAY, CROWN POINT, IN 46307**
Name & Address

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