

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

IN RE: The Matter of:)
THE SALE OF REAL PROPERTY WITH)
DELINQUENT TAXES, BOARD OF)
COMMISSIONERS, LAKE COUNTY,)
Petitioner)

Tax Key No: 25-43-0221-0019

PETITION TO ISSUE A TAX DEED

Comes now the Lake County Board of Commissioners, by counsel, and shows and represents to the Auditor of Lake County, Indiana:

1. That the Lake County Board of Commissioners received a Tax Sale Certificate for the following real estate at the tax sale of February 11, 1998, to wit:

I.D. No: 14506576

GARY PARK ADD L 19 BL 2 (0816176033)
Common Street Address: 2372 FILLMORE STREET; GARY,
INDIANA

2. The period of redemption expired June 11, 1998.
3. The real property set out above has not been redeemed from the sale.
4. All taxes and special assessments, penalties and costs have been removed.
5. The notices required by law have been given as evidenced by Exhibit "A" attached hereto.

6. The Petitioner has complied with all of the provisions of law entitling the purchaser to a deed.

WHEREFORE, Petitioner requests the Auditor of Lake County to issue a Tax Deed for the real estate herein in the name of the Board of Commissioners, of Lake County, Indiana.



Michael W. Bosch
Indiana Atty. No: 2852-45

BOSCH & BANASIAK
7150 Indianapolis Blvd.
Hammond, IN 46324
(219) 844-3020
FAX: (219) 844-3023
Attorney for Petitioner

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

LONG, YVONNE
P.O. BOX 16
GARY, IN 46402

4a. Article Number
P 160 463 711

4b. Service Type

Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
APR 20 1998

5. Received By: (Print Name)
Yvonne Long

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)
X Yvonne Long

Document NOT OFFICIAL
 This Document is the property of
 the Lake County Recorder!

PS Form 3811, December 1994

102595-97-B-0179 Domestic Return Receipt



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EXHIBIT
A