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:

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6443 Rhode Island Avenue Hammond, Indiana 46323

WARRANTY DEED

THIS INDENTURE WITNESSETH, That MATHEW F. BOSWINKLE, a widow Lake County in the State of Indiana ("Grantor") of **CONVEYS AND WARRANTS TO** MATHEW F. BOSWINKLE, FRED BOSWINKLE, and JAMES BOSWINKLE, all as Joint Tenants With Rights of Survivorship of County in the State of Indiana Lake in consideration of One Dollar and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Lake County, in the State of Indiana: following described real estate in All of the following described tract except the North 132 feet thereof: Lot Sixteen (16), except the East 10 feet thereof and all of Lots Seventeen (17), Eighteen (18), Nineteen (19) and Twenty (20), Block Three (3), Clineway Addition to Hammond, together with the vacated 20 foot alley lying North of said lots and together with the North 7 feet of vacated 165th Street (Summer Boulevard) adjoining the South ide of said lots, as shown in Plat Book 20, page 30, in Lake County, Endiana. More commonly known as: 6443 Rhode Island Avenue Hammond, Indiana 46323 (This transaction is exempt from the filing of a "Disclosure of Sales Information" Form for the reason that there is no monetary consideration) the Lake County Recorder! Dated this 5thday of October, 199 9. DULY ENTERED FOR TAXATION SUBJE FINAL ACCEPTION CE FOR TRANSFER A (Signature) (Signature) (Printed Name) (Printed Name) PETER BENJAMIN (Signature) (Signature) LAKE COUNTY AUDITOR (Printed Name) (Printed Name) STATE OF INDIANA COUNTY OF LAKE Before me, the undersigned, a Notary Public in and for said County and State, this 5th day of October, 1999, personally appeared: and acknowledged the execution MATHEW F. BOSWINKLE of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal. 1-27-2000 ____ Signature ___ Jeneson Cabello My commission expires: ___ Resident of Lake County Printed Teresa Cabello, Notary Public STATE OF COUNTY OF Before me, the undersigned, a Notary Public in and for said County and State, this _____day of _______, 199__ 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 ____ ____County Printed ____ Resident of ___ _, Notary Public

Thomas D. Ryan

East Chicago, Indiana 46312

Thomas Repr

4704 Indianapolis Blvd.

This instrument prepared by ____

MAIL TO:

Attorney Identification No. 6256-45

THE ALLEN COUTY INDIANA BAR ASSOCIATION, INC. (REV. 9/93)

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Attorney at Law