

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

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99 OCT 27 PM 12:07

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Mail tax bills to:
3077 Parkwood Place
Crown Point, IN 46307

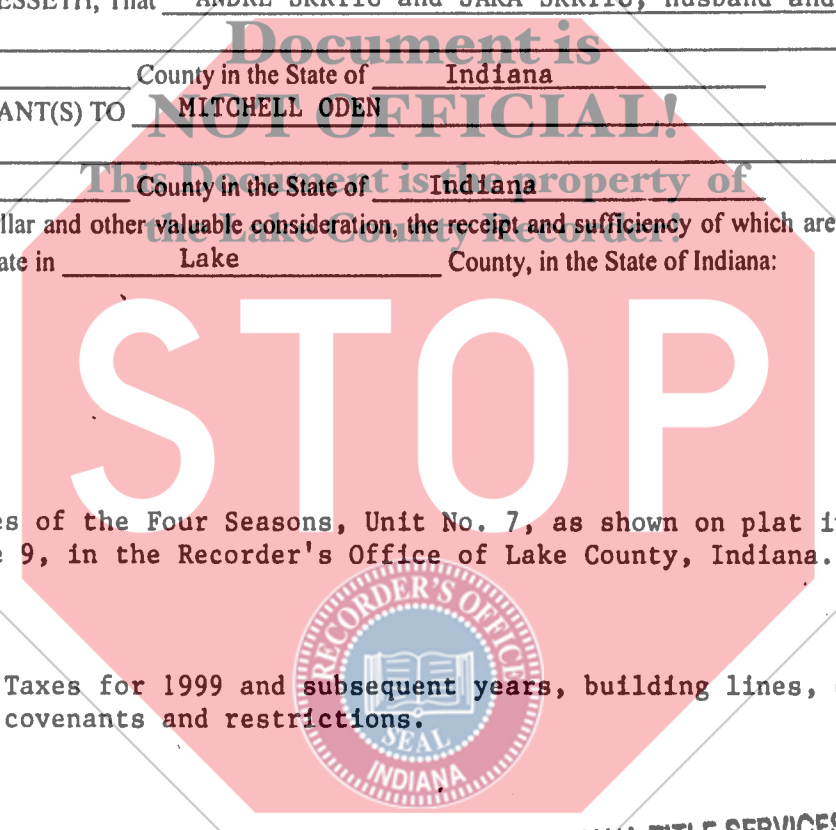
Key No. 10-49-59

WARRANTY DEED

THIS INDENTURE WITNESSETH, That ANDRE SKRTCIC and JAKA SKRTCIC, husband and wife ("Grantor")

of Lake County in the State of Indiana
CONVEY(S) AND WARRANT(S) TO MITCHELL ODEN ("Grantee")

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 776, Lakes of the Four Seasons, Unit No. 7, as shown on plat in Plat Book 38, page 9, in the Recorder's Office of Lake County, Indiana.

SUBJECT TO: Taxes for 1999 and subsequent years, building lines, easements, covenants and restrictions.

NORTHWEST INDIANA TITLE SERVICES, INC.
162 Washington Street
Lowell, Indiana 46356
769-0727 or 696-0100

C099-8187

(Do not mark below this line)

DULY ENTERED FOR TAXATION SUBJECT TO
FINAL ACCEPTANCE FOR TRANSFER.

001225

OCT 19 1999

PETER BENJAMIN
LAKE COUNTY AUDITOR

12:00
P.P.

6490

Dated this 12th day of October, 1999

Andre Skrtic

Jaka Skrtic

(Signature)

(Signature)

ANDRE SKRTIC

JAKA SKRTIC

(Printed Name)

(Printed Name)

(Signature)

(Signature)

(Printed Name)

(Printed Name)

STATE OF Indiana

COUNTY OF Lake

SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 12th day of October, 1999 personally appeared: Andre Skrtic and Jaka Skrtic

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: 4-30-01

Signature Angie Konchar

Resident of Lake County Printed Angie Konchar, Notary Public

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 RICHARD A. ZUNICA, 162 WASHINGTON STREET, LOWELL, IN 46356, Attorney at Law
Attorney No. 1504-45

MAIL TO:

