(Z)

STATE OF INDESS LAKE COUNTY FILED FOR RECOUNT

99089460

99 OCT 29 AM 9: 09

THIS FORM HAS BE OF INSTRUMENT, F	EN PREPARED	ひゅつひ (FOR USE IN TH NNK SPACES, S	IE STATE	MONIO OF INDIANA OUT PROVIS	J. W. CARTE BY LAWYER IONS AND IN	F S ONLY. SERTING	SELECTI 3 SPECIA	NG A FORM L CLAUSES
MAY CONSTITUTE Mail tax bills to: 1010 W. CHC	THE PRACTICE	OF LAW, WHIC	H SHOULD	BE PERFORM	MED ONLY BY	YALAW Cy#1	YER.	
THIS INDENTURE W								
of <u>Lake</u>		County in the Sta	te of	Indiana	ATI			
CONVEY(S) AND WA		Jason A Chis Docu					husban	d and ("Grantee")
of Lake		County in the Sta	ite of	Indiana	ordor!	_ `		
in consideration of On following described rea				-			reby ackn	owledged, the
plat the of the l	in Block 1 ereof, rece Recorder of to the following Real esta tallment des not yet Easements or instrume	lowing: te taxes fue in Nove	or 1998 mber 19 ayable.	beginni	ng with	the quent	Office	
					DULY ENTEREI	D FOR TAXA ANCE FOR T	tion subje ransfer.	CT TO
		(Do n	ot mark bel	ow this line)		CT 28		<u></u>
					PET LAKE (TER BEN	JAMIN AUDIT	OR

001878

12:00

Dated)this 25th day of	1- October	1999		
Mornett W. Ulbonis	Danie	·		
(Signature)		(Signature)		
KENNETH W. URBANIAK		, , ,		
(Printed Name)		(Printed Name)		
(Signature)	Doci	(Signature) 1 1S		
(Printed Name)	NOTO	(Printed Name)		
STATE OF INDIANA	COUNTY OF L	AKE	CSS:	
Before me, the undersigned, a Notar	Tins Documen	ty and State, this	25 day of	Ontober,
and acknowledged the execution of the My commission expires:	Signature	Con		
	County Printed	Corina	Johns	, Notary Public
STATE OF	COUNTY OF		SS:	
Before me, the undersigned, a Notar	ry Public in and for said Coun	ty and State, this	day of	
personally appea	ared:	WEAR OF TE		
and acknowledged the execution of th	e foregoing deed. In witness wh	ereof, I have hereunto su	bscribed my name and afl	fixed my official seal.
My commission expires:	Signature	SEAL !		
Resident of	County Printed	14		, Notary Public
This instrument prepared by ERV	IN C. CARSTENSEN,			, Attorney at Law
Attorney No. 3141-45 503	Main St., Hobart	, 1N 46342		
MAIL TO:				



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