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THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. SELECTING A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS AND INSERTING SPECIAL CLAUSES MAY CONSTITUTE THE PRACTICE OF LAW, WHICH SHOULD BE PERFORMED ONLY BY A LAWYER.

Mail tax bills to: 542 Raven Road Valparaiso, IN 46385 Key No. 7-259-4

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THIS	INDENTURE WI	TNESSETH	That RAYMOND J.	ALVARADO and VIRGINIA A. ALVARADO, husband
and	l wife			("Grantor")
of	Lake		County in the State	ofenindianahe property of
CON	VEY(S) AND WA	RRANT(S)	O MICHAEL J.	RIESE and SHAYNA S. RIESE, husband and wife
				("Grantee")
of	Lake		County in the State	of Indiana
in con	sideration of One	Dollar and	other valuable consider	ration, the receipt and sufficiency of which are hereby acknowledged, the
follow	ving described real	estate in	Lake	County, in the State of Indiana:

Lot 19 in Holiday Creek, Unit No. 4, as per plat thereof, recorded in Plat Book 40, page 83, in the Office of the Recorder of Lake County, Indiana.

SUBJECT TOL: Taxes for 2000 and subsequent years, building lines, easements and restrictions.

NORTHWEST INDIANA TITLE SERVICES, INC.
162 Washington Street
Lowell, Indiana 46356
769-0727 or 639-0100

00-8954

(Do not mark below this line)

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

JUL 282000

PETER BENJAMIN LAKE COUNTY AUDITOR 01783 16.00 7203

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Dated this 26th	day of	July		2000	·	$a$ $A_{\alpha} \subseteq$	
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(Signature)				(Signature)	9		
RAYMOND J. ALVAR	ADO		Doc	VIRGINIA	A. ALVARAI	00	
(Printed Name)				(Printed Na	me)		
***		NIO	T	July 1	CIA		
(Signature)		110		(Signature)		<b>—</b>	
(0.1.13.1	<b>T</b>	his Do	cume		e prope	rty of	<del></del>
(Printed Name)		the L	ake (	(Printed Na	Record	erl	
STATE OF Indi	ana	COUN	TY OF _	Lake	iteeor a	SS:	
Before me, the undersigned	ed, a Notary P	ublic in and fo	r said Cour	nty and State, th	his 26th	day of	July ,
	ally appeared:	Raymond	J. Alva	rado and V	irginia A.	Alvarado	
and acknowledged the exec			witness wh	o <del>ccof, Lhave he</del>	ereunto subscribe	my name and affin	ced my official seal.
My commission expires:	9-4-0	6	Signature				)
Resident of Lake		County	Printed	Richard	A. Zunica		, Notary Public
STATE OF		COUN	TY OF			SS:	
Before me, the undersigned	ed a Notary P			ALL TO BE A PORT	hie	day of	
	ally appeared:		E CO		<u> </u>	uay or	
person.	any uppounds.		13		<b>[2]</b>		
and acknowledged the exec	ution of the for	egoing deed. In	witness wi	ereof I have he	reunto subscribe	i my name and affin	red my official seal
My commission expires:		cgoing dood. In		SEAL		any name and and	iod my ornomi sour.
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Resident of	Martin 201	County	Printed				, Notary Public
omit to the	DICHARD	A ZUNIT CA	162 574	CUTNOTON C	TREET LOUI	TI TW 46256	<b>.</b>
This instrument prepared	JY KICHAKD	A. ZUNICA,	, 102 WA	STINGION S	IREEI, LOWE	LL, IN 40330	_, Attorney at Law
Attorney No. <u>1504-45</u>							
MAIL TO:							
ATIME							

A VILLEN STORMAN BAR ASSOCIATION

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