affected.

Notice: This is a legally binding document. Consult your attorney if you do not understand any part of it.

	QUITCLAIM DEED
	THIS QUITCLAIM DEED, is made on the
	by and between, Sabrina O. Holden ("First Party")
	whose residence and/or mailing address is 612 Housey Street, Gary IN 46406
	Macall Harris For
	100 N 12/1 C 1 1 50 4/304
	whose residence and/or mailing address is 102 N Walbash Chesterton, 104 41304
	WITNESSETH, That in consideration for the sum of
	the Second Party any right, title, interest and claim which the First Party has in and to the following described real property, together with any improvements thereon:
	Let 430, Robert British Marquette Patrick The Party Estates The Robert British Marquette Patrick The Party Estates The P
	Sound Aller the City of Cony, as the first
	recorded in Phit Book 29 page 22, in the office of the
	the Recorder of Lake Conty, Indicate
	Key # 41- 255 Document is
	NOTOFFICIALL
	Add release of Dower, Curtesy or other Spousal Rights, if applicable:
	This Document is the property of
	the Lake County Recorder!
	DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER
	The state of the s
	JUL 1 1 2003
	STEPHEN R. STIGLICH
	TO HAVE AND TO HOLD the above described property unto the Second Party; and the Second Party's
	executors, administrators, successors and assigns forever.
	It is understood that this conveyance is made without covenants or warranties of any kind, either express or implied.
	IN WITNESS WHEREOF, the First Party has signed and sealed this Quitclaim Deed on the day and year first
	above written. Witnesses
1	Jakuna D. Wolden (L.S.)
	a003825
Title	Ticor Title recorded this document as an
moda	ation. Ticor did not examine the
men	t or the title of the real estate

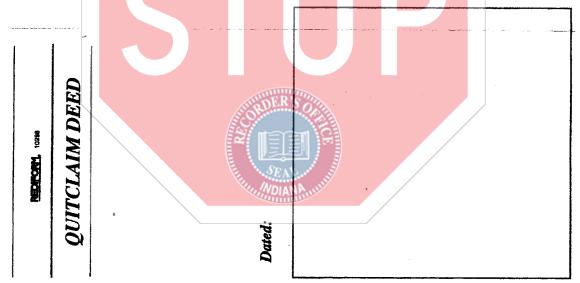
Return First State Boul of Porter

STATE OFSS)
COUNTY OF	:
Onbefore n	
(date)	(name and title of officer taking Acknowledgement)
Notina S.	, personally appearedSabrina D. Holden
scribed to the within instrument and ack	(name(s) of person(s) signing instrument) te on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are sub- mowledged to me that he/she/they executed the same in his/her/their authorized gnature(s) on the instrument the person(s), or the entity upon behalf of which the per- STATE OF INDIANA
WITNESS my hand and official seal.	COUNTY OF PORTER Subscribed and sworn to before
Signature	me this // day of June, 2003\ Susan J Collins Notary Public - Susan J. Collins
	Resident of PORTER County.
	My Comm. Expires 1-4-07

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