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2003 OCT 24 11:44

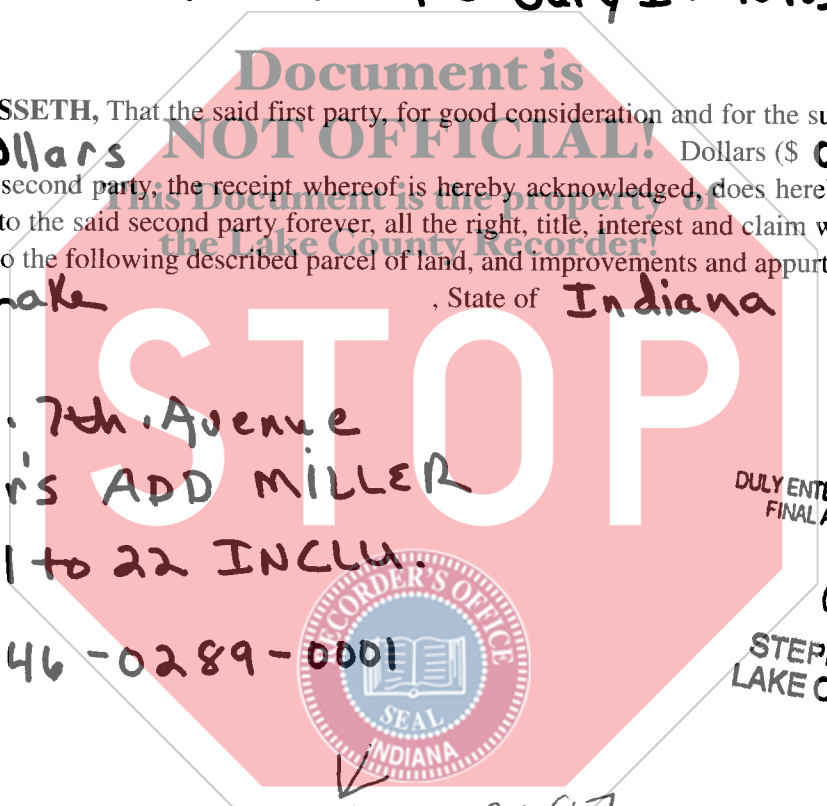
LF298-04  
R298-04

### QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this **24** day of **October**, 20**03**,  
 by first party, Grantor, **Humane Society of N.W. IN Inc formerly known as**  
 whose post office address is **6800 E. 7th Ave. Gary IN 46403 Lake Shore Humane Society Inc**  
 to second party, Grantee, **Humane Society of N.W. IN, INC.**  
 whose post office address is **6800 E. 7th Ave. Gary IN 46403**

WITNESSETH, That the said first party, for good consideration and for the sum of  
**Zero dollars** Dollars (\$ **00.00** )  
 paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release  
 and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first  
 party has in and to the following described parcel of land, and improvements and appurtenances thereto in  
 the County of **Lake**, State of **Indiana** to wit:

**6800 E. 7th Avenue  
 Packer's ADD MILLER  
 LOTS 1 to 22 INCLU.  
 REY # 46-0289-0001**



DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

OCT 24 2003

STEPHEN R. STIGLICH  
LAKE COUNTY AUDITOR

fax mailing: p.o. Box 2697  
Gary 46403

002068

16-00  
03  
CP

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

\_\_\_\_\_  
Signature of Witness

Betty Clayton  
Signature of First Party

\_\_\_\_\_  
Print name of Witness

Betty Clayton  
Print name of First Party

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Signature of First Party

\_\_\_\_\_  
Print name of Witness

\_\_\_\_\_  
Print name of First Party

State of INDIANA }  
County of LAKE }  
On OCTOBER 24, 2003 before me,  
appeared BETTY CLAYTON

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.  
WITNESS my hand and official seal.

Barbara J. Bortoli  
Signature of Notary

**Document is NOT OFFICIAL**  
BARBARA J. BORTOLI Affiant \_\_\_\_\_ Known X Produced ID  
Notary Public, State of Indiana Type of ID DRIVERS LICENSE  
County of Lake (Seal)  
My Commission Expires 05/19/2008

State of \_\_\_\_\_ }  
County of \_\_\_\_\_ }  
On \_\_\_\_\_ }  
appeared \_\_\_\_\_ }

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.  
WITNESS my hand and official seal.

\_\_\_\_\_  
Signature of Notary

Affiant \_\_\_\_\_ Known \_\_\_\_\_ Produced ID \_\_\_\_\_  
Type of ID \_\_\_\_\_ (Seal)

\_\_\_\_\_  
Signature of Preparer

\_\_\_\_\_  
Print Name of Preparer

\_\_\_\_\_  
Address of Preparer