Quitclaim Deed

TO LEMOVE NAME

THE SECOND PARTY, ALEKANDER BALYS

THIS QUITCLAM DEED, executed this 30 day of OCTO BER by first party, Grantor, A STANISCAL BALYS ALEKSANDER BALYS whose post office address is 4922 NORTH COTE AVE. EAST CHICAGO, IN 46312 to second party, Grantee, DALEKSANDER BALYS STANLEY BALYS and ROLALIA BALYS JT RIS whose post office address is 4922 NORTHCOTE AVE, EAST CHICAGO, IN 46312 WITNESSETH, That the said first party, for good consideration and for the sum of Ten Dollars (\$______OO_____) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitter 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 State of **INDIANA** to wit: SUBDIV. NW. 5.32 T.37 R.9 ALL L.11 BL.8 Dangment is NOT OFFICIAL! SUBDIThin Docusn32t 75 317e Propes2, of 10 the Lake County Recorder! DULY ENTERED FOR TAXATION SUBJECT FINAL ABOUT TANCE FOR TRANSFER STEPHEN R. STIGLICH

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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: Miller Bolys
Print name of Witness: LUKAS2 BALYS
Signature of Witness: Kamil Bolys
Print name of Witness: KAMIC BALYS
Signature of First Party: Stewslaw Boly
Print name of First Party: STANISLAW BALYS
AB First Signature of Second Party: Aleksander Zolys
A.B. First Print name of Second Party: ALEKSANDER 3ALYS
Signature of Preparer LUKAS2 BALYS Print Name of Preparer LUKAS2 BALYS Address of Preparer LUKAS2 BALYS Address of Preparer LUKAS2 BALYS State of Indiana County of Lake On October 30, 2004 before me, LKAS2 Balys, Kamil Balys, Stanislaw Bulys + 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
"OFFICIAL SEAL" (Seal)
THERESA KAMINSKI NOTARY PUBLIC, STATE OF INDIANA COMMISSION #515193 MY COMMISSION EXPIRES 03/15/2010