

Dated: July 14, 2010

Darlene A Hallman
Signature of Grantor

Darlene A. Hallman
Name of Grantor

[Signature]
Signature of Witness #1

Robert O'Hara
Printed Name of Witness #1

[Signature]
Signature of Witness #2

Chris Hallman
Printed Name of Witness #2

State of INDIANA County of LAKE

On July 14, 2010, the Grantor, DARLENE ANN HALLMAN, personally came before me and, being duly sworn, did state and prove that he/she is the person described in the above document and that he/she signed the above document in my presence.

Carol J. Cody
Notary Signature

"I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT I HAVE TAKEN REASONABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW."

PREPARED BY: [Signature]

Notary Public, CAROL J. CODY

In and for the County of LAKE State of INDIANA

My commission expires: _____ Seal

CAROL J. CODY
Notary Public
State of Indiana
My Commission Expires Oct 11, 2014

Send all tax statements to Grantee.