SF-9D

Manufact. 1 Hansen's Woods 47/54

782144

Form of Assignment of Mortgage

	CAPITAL FEDERAL SAVINGS & LOAN ASSOCIATION ,
a FEDERAL ASSOCIATION ("Assignor"), does hereby sell,
assign, transfer, set over, e	ndorse and deliver, without
recourse, unto Indiana Housin	g Finance Authority, a governmental
instrumentality of the State	of Indiana, and having its
principal office at One North	Capitol Street, Indianapolis,
indiana 46204, that certain r	eal estate mortgage dated the
27th day of November	, 1984 , executed by
DONALD W. IDDINGS, II AND J	ULIE A. IDDINGS, HUSBAND AND WIFE
called "Borrower") and recor	(whether one or more, ded in the office of the Recorder
of HAKE	County, Indiana, 11/30/84
as Document No. 702143	(Insert recording information).
as bodument No.	(1115020 2000aanig 211202mac2011).
Immediately upon assignm	ent, the mortgage and the note
secured thereby become subject	t to a pledge made by The Indiana
	the Indiana National Bank, Trustee,
in an Indenture of Trust date	
performance of the Indiana Ho	
Obligations under the terms o	f said Indenture of Trust.
	gnor has caused its Corporate
	cer thereunto duly authorized November 19 84
this 27th day of	, 19 <u>04</u> .
//	CADIMAL REDERAL GANTINGS A TOAN ACCOURANTON
	CAPITAL FEDERAL SAVINGS & LOAN ASSOCIATION (Name of Lender)
Malla de la companya della companya	(Name of Lender)
	By: (A) A Fig. 76
Attest:	Its, PRESIDENT
Its, SECRÉTARY-TREASURER	· Se con che di che
CLOYD E. TIPTON	JOHN F. SIKORA
	(Print Officer's Name)
	RD RD S
	was prepared by the Indiana Housing
	terial in the blank spaces in the
	the direction of: JOHN F. SIKORA
PRESIDENT OF CAPITAL FEDERAL SAVINGS	3 & LOAN ASSOCIATION .
STATE OF INDIANA)	
COUNTY OF LAKE) SS	
COUNTY OF	
The foregoing instrument	: was acknowledged before me this
	, 19 84, by JOHN F. SIKORA AND
	C./TREAS. Of CAPITAL FEDERAL SAVINGS & LOAN ASSOC.
a C. FEDERAL ASSOCIATION CORP	poration, for and on behalf of the
corporation, and who, after b	eing duly sworn, did state that he
executed and delivered said a	ssignment with the authority of the
board of directors of said co	rporation.
K K K K K K K K	\bigcap \cdot , \cdot , \cdot , \cdot , \cdot
My Commission Expires:	Jesufer Ol Vine
The state of the s	JENIFES LEVINE A Notary Public
., <u>~.,,</u> 1/29/88	Resident of LAKE County
★ ***	· · · · · · · · · · · · · · · · · · ·