SATISFACTION OF MORTGAGE

THIS CERTIFIES, That a certain Mortgage executed by JOSE P GOME (DECEASED) AND ALICE GOMEZ, Mortgagor(s), to the Mortgagee:	\$Z
BENEFICIAL INDIANA INC.	
BENEFICIAL INDIANA INC. Formerly known as Beneficial Finance Co. of Indiana	: e
BENEFICIAL INDIANA INC. Formerly known as Beneficial Financ Co. of Indiana, successor by way of merger to the right title and interest of Beneficial Finance Co. of	:e
BENEFICIAL INDIANA INC., successor by way of merger to the right, title and interest of Commonwealth Loan Company d/b/Beneficial Finance Co.	e a
X BENEFICIAL MORTGAGE CO. OF INDIANA,	
BENEFICIAL OHIO INC., (formerly known as West Beneficial Finance, Inc.)	1
BENEFICIAL OHIO INC., successor by way of merger, through chain of title passing through Capital Financial Service Inc., to the right, title and interest of Beneficial Financ of Indiana, Inc. (formerly known as Capital Financia Services Inc.)	s e
(the checkmark identifies the Mortgagee)	
on the 12th day of June, 1995, recorded in Mortgage Record No. 95-033179, Book N/A, Page N/A, Drawer No. N/A, Yinstrument No. N/A, Fill No. N/A, Card No. N/Ahelakecounty/198tate/of-Indiana, has been full paid and satisfied, and the Mortgage is hereby released.	e Ly
IN WITNESS WHEREOF, the undersigned, in the capacity hereafted identified, has caused this Satisfaction to be executed this 11th day of September, 1995.	er of
Attest: BENEFICIAL INDIANA INC. BENEFICIAL MORTGAGE CO. OF INDIANA BENEFICIAL OHIO INC. J. B. Smith, Asst. Secretary J. Lewis, Vice President	I AKE COUNT
ACKNOWLEDGMENT (23))
STATE OF DELAWARE) SS. S	
NEW CASTLE COUNTY)	٠
Before me, the undersigned, a Notary Public in and for said County, the 11th day of September, 1995, personally appeared J. L. Lewis and J. Smith, Vice President and Asst. Secretary respectively of the foregoing corporation, and acknowledged the execution of the foregoing instrument	ng
WITNESS MY HAND and official seal. Debra J. Grant Notary Public	
Resident of New Castle County for the State of Delaware	
My Commission Expires: December 21, 1995	
This Instrument was prepared by: Debra J. Grant 301 N. Walnut St. P. O. Box 911 Wilmington, DE 19899	
TO THE OWNER OF THE PERCOPPED DIFASE PETURN TO:	

AFTER SATISFACTION IS RECORDED PLEASE RETURN TO: Beneficial Indiana Inc. P. O. Box 402 Schererville, IN 46375-0402

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