

COMMON NAME AFFIDAVIT

To be used for all judgments under \$25,000.00

18-28-0046-0002

STATE OF INDIANA)
COUNTY OF ST. JOSEPH)

STATE OF INDIANA)
LAKE COUNTY)
FILED FOR RECORD)

I WILLIAM J. MITCHELL 99065188 and I 99 AUG -4 PM 2:15
currently residing at 15 BEVERLY PL. MUNSTER, IN. 46321-1048

being duly sworn according to law do hereby depose, say and swear that to the best of my knowledge, information and belief the statements and representations in this affidavit, are true and accurate.

1. **NAME.** My full name appears above. I solemnly swear that I am one and the same person as (including any alias, former, maiden, or other name(s) used now or in the past, even if I have had my name legally changed): **WILLIAM J. MITCHELL**

Lot 2, Block 7 in Broadmoor addition to the town of Munster as per plat thereof, recorded in Plat Book 18, page 3 in the office of the recorder of Lake County, Indiana

2. **COMMON NAME.** I have reviewed the judgment(s) and/or other lien(s) appearing on the attached LSI title report # 67553370, which I have initialed or signed.

Judgment(s) numbered 45C01-9407-CT-01411-0 is/are not against me, but rather, is/are against someone else with a similar name.

Judgment(s) numbered _____ is/are against a business with which I have never been affiliated.

Judgment(s) numbered _____ is/are against me and will be paid from the proceeds of the loan.

3. **EXCEPTIONS AND ADDITIONS.** The following is a complete list of exceptions and additions to the above statements, and any explanation or elaboration necessary to clarify the statements in this affidavit.

THE JUDGEMENT IS AGAINST WILLIAM MITCHELL M.D. AND RICHARD S. LONGLEY M.D. WILLIAM J. MITCHELL (ASSOCIATES FINANCIAL SERVICES CUSTOMER) IS NOT OR HAS NEVER BEEN AN M.D.

0 page(s) attached for additional information.

We have made this affidavit to induce LENDERS SERVICE to issue a policy of title insurance to mortgagee in connection herewith. Being so induced, they and their agents may and do rely upon the truthfulness of the statements made in this affidavit. Any false statements, misrepresentations or material omissions may result in criminal or civil liability.

Witness:

Name and SS# William J. Mitchell 337 609061

Witness:

Name and SS#

STATE OF IN
COUNTY OF LAKE

000406

The foregoing instrument was acknowledged before me by William J. Mitchell, who is/are personally known to me and who did take an oath, this 30 day of July, 1999

My commission expires:

[Signature]
Notary Public

DAVID M BENG
NOTARY PUBLIC STATE OF INDIANA
LA PORTE COUNTY

DAVID M BENG
NOTARY PUBLIC STATE OF INDIANA
LA PORTE COUNTY
MY COMMISSION EXPIRES MAY 24, 2001

1: EQUITYAF.DOC

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Assoc Fin Ser.
6317 University Commons
South Bend, IN 46635

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