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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 010493

2006 FEB -9 AM 8:49

MICHAEL A. BROWN
RECORDER



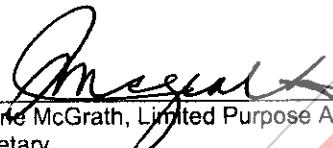
Satisfaction of Mortgage

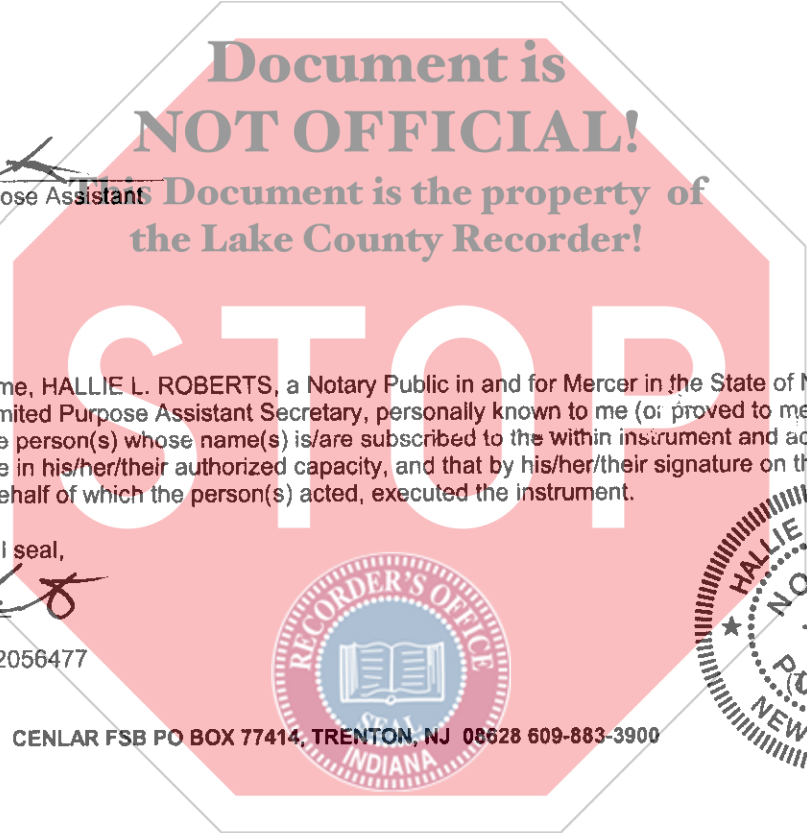
Cenlar FSB #:0016240947 "DITOLA" Lender ID:V42/0016240947 Lake, Indiana
KNOW ALL MEN BY THESE PRESENTS that STATE FARM BANK F.S.B., holder of a certain Mortgage to secure the amount of \$85,000.00 whose parties, dates and recording information are below, does hereby acknowledge that it has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said Mortgage.

Original Mortgagor: DANIEL P. DITOLA
Original Mortgagee: STATE FARM BANK, F.S.B.
Dated: 11/25/2002 Recorded: 12/05/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2002 112148, in the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 10340 BULL RUN DR, ST. JOHN, IN 46373

IN WITNESS WHEREOF, the undersigned has, by the officer duly authorized, executed this document.

STATE FARM BANK F.S.B.
On January 4th, 2006


By: 
Joanne McGrath, Limited Purpose Assistant Secretary

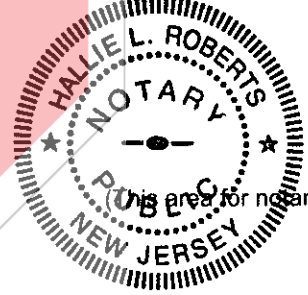


STATE OF New Jersey
COUNTY OF Mercer

On January 4th, 2006, before me, HALLIE L. ROBERTS, a Notary Public in and for Mercer in the State of New Jersey, personally appeared Joanne McGrath, Limited Purpose Assistant Secretary, 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, and that by his/her/their signature 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,


HALLIE L. ROBERTS
Notary Expires: 03/15/2009 #2056477



Prepared By: **Theresa Shuster**, CENLAR FSB PO BOX 77414, TRENTON, NJ 08628 609-883-3900
When Recorded Return To:
DANIEL DITOLA
10340 BULL RUN DR
SAINT JOHN, IN 463739183

↑

OK # 131939
1200
BB

Prescribed by the
State Board of Accounts
(2005)

County form 170

Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do hereby affirm under the penalties of perjury:

1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.




Signature of Declarant

Theresa Shuster
Printed Name of Declarant