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STATE OF INDIAN  
LAKE COUNTY  
FILED FOR RECORD

2006 FEB -9 AM 8:50

2006 010497

Loan #: 0320906555 Customer #: 774 RLS #: 1123553  
Page 1

MICHAEL A BROWN  
RECORDER

**SATISFACTION OF MORTGAGE**

KNOW ALL MEN BY THESE PRESENTS: that the undersigned, holder of a certain mortgage, 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: **ALEXANDER LAZORIK, UNMARRIED AND KENNETH BERGIN, MARRIED**

Original Mortgagee: **FIRST FRANKLIN FINANCIAL CORPORATION**

Original Mortgage Amount: **\$58,000.00**

Dated: **NOVEMBER 26, 2003** Recorded on: **JUNE 21, 2004 as Instrument No. 2004-051823 in**

**DRAWER: --- at CARD: --- and Re-Recorded on: JANUARY 04, 2006 as Instrument No. 2003-128128,**

Property Address: **1108 W 62ND AVE MERRILLVILLE IN 46410**

County of **LAKE**, State of **INDIANA**

IN WITNESS WHEREOF, THE UNDERSIGNED, BY THE OFFICER DULY AUTHORIZED, HAS DULY EXECUTED THE FOREGOING INSTRUMENT ON FEBRUARY 02, 2006

Beneficiary:

**HOMEQ SERVICING CORPORATION ATTORNEY IN FACT FOR WELLS FARGO BANK, NA, AS TRUSTEE**

By:

*Juanita Jennette*  
**Juanita Jennette, Vice President**

State of **CALIFORNIA**

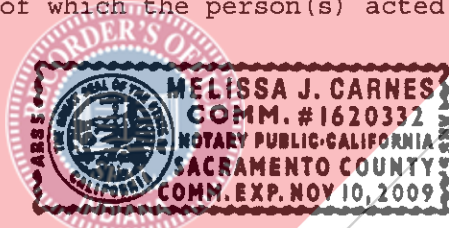
County of **SACRAMENTO**

} ss.

On FEBRUARY 02, 2006, before me, **Melissa J Carnes**, a Notary Public, personally appeared **Juanita Jennette, Vice President** 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(ies) and that by his/her/their signature(s) 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.

*Melissa J Carnes*  
(Notary Name): **Melissa J Carnes**



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PREPARED BY: **PRINCETON RECONVEYANCE SERVICE: P O BOX 13309**  
**Mailcode #CA3501**  
**Sacramento, CA 95813-3309**  
**Melissa Carnes**

Recording Requested By:  
**PRINCETON RECONVEYANCE SERVICE**

And When Recorded Mail To:  
**PRINCETON RECONVEYANCE SERVICE**  
**P O BOX 13309**  
**Mailcode #CA3501**  
**Sacramento, CA 95813-3309**

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### 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 numbers;
2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

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

  
\_\_\_\_\_  
Signature of Declarant

  
**Melissa J. Carnes**  
\_\_\_\_\_  
Printed Name of Declarant