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MICHAEL A. BROWN RECORDER

SATISFACTION OF MORTGAGE

Mercantile Loan Number 5215803

620058706

This Certifies, that a certain Mortgage executed by JOHN J. GRDINA and THERESA GRDINA, to Mercantile National Bank of Indiana, calling for \$20,000.00, dated JULY 17, 2003, and recorded AUGUST 11, 2003, as Document No. 2003 083529, LAKE County, State of Indiana, has been fully paid and satisfied, and the same is hereby released.

Property is legally described as:

THE EAST 155.0 FEET OF THE WEST 175.0 FEET OF THE FOLLOWING DESCRIBED PARCEL: PART OF THE EAST HALF OF THE NORTHEAST QUARTER OF SECTION 19, TOWNSHIP 36 NORTH, RANGE 9 WEST OF THE SECOND PRINCIPAL MERIDIAN, COMMENCING AT A POINT ON THE WEST LINE OF SAID TRACT WHICH IS 1,740.7 FEET NORTH OF THE SOUTHWEST CORNER THEREOF AND RUNNING THENCE NORTH ALONG THE WEST LINE OF SAID TRACT 59.5 FEET; THENCE NORTH 89 DEGREES 50 MINUTES 30 SECONDS EAST 366.46 FEET; THENCE SOUTH 0 DEGREES 15 MINUTES EAST 59.5 FEET; THENCE SOUTH 89 DEGREES 50 MINUTES 30 SECONDS WEST 367 FEET TO THE POINT OF BEGINNING, IN THE TOWN OF MUNSTER, IN LAKE COUNTY, INDIANA.

UNIT NUMBER: 18
KEY NUMBER: 28-5-121

ATTEST

Property is commonly referred to as: 8221 GREENWOOD AVENUE, MUNSTER, INDIANA 46321

MERCANTILE NATIONAL BANK OF INDIANA

Barbara A. Graver, Vice President

Douba Dawar

Linda Harwood, Assistant Vice President

State of Indiana, Lake County, SS:

Before me, the undersigned, a Notary Public in and for said County, this **26TH** day of **JANUARY 2006** personally appeared Barbara A. Graver, Vice President and Linda Harwood, Assistant Vice President of Mercantile National Bank of Indiana and acknowledged the Execution of the foregoing Satisfaction of Mortgage.

Patty Scarbrough

My commission expires: August 2, 2010

County of Residence: Porter

This document was prepared by: Stacey Johnson, Mortgage Loan Service Mercantile National Bank of Indiana. 5243 Hohman Avenue, Hammond, IN 46320.

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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 herby 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

Printed Name of Declarant