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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2006 011787

2006 FEB 14 AM 9:01

MICHAEL A. BROWN  
RECORDER

<b>Release of Mortgage</b>	
DeMotte State Bank P.O. Box 346 Lowell, IN 46356 To	Marshall or Joan F. Corns 272 Burnham Lowell, IN 46356-1803
Received for record this _____ day of _____, 20____ at _____ o'clock _____ M., and recorded in Mortgage Record No. _____ page _____	Recorded _____ County, Auditor's fee \$ _____

Document is NOT OFFICIAL!

# SATISFACTION OF MORTGAGE

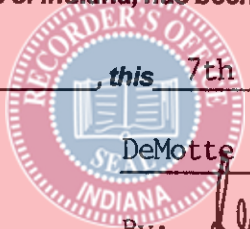
This Certifies, That a certain Mortgage executed by Marshall Corns and Joan F. Corns

to DeMotte State Bank

on 4th day of January, 1999, calling for \$ 20,000.00 and recorded in Mortgage Record No. \_\_\_\_\_, Page \_\_\_\_\_, Document No. 99006855

Lake County, State of Indiana, has been fully paid and satisfied, and the same is hereby released.

WITNESS His hand and seal, this 7th day of February, 2006



DeMotte State Bank  
By: Jeff Sawaska  
Jeff Sawaska, VP & Mtg Loan Officer

State of Indiana, Lake County ss,

Before me, the undersigned, a Notary Public in and for said County, this 7th day of February, 2006,

Personally appeared DeMotte State Bank by Jeff Sawaska, VP and Mortgage Loan Officer

acknowledged the execution of the annexed satisfaction of mortgage.

Witness my Hand and official seal.

Melissa L. Schlueter Notary Public  
Resident of Newton Melissa L. Schlueter County

My Commission expires 10-29-08

This instrument prepared by: Melissa L. Schlueter



Please return to:

DEMOTTE STATE BANK  
Lowell Banking Center  
P.O. Box 346  
Lowell, IN 46356

CK#  
035631  
1202  
D.A.M.

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.



*Melissa L. Schlueter*  
Signature of Declarant

Melissa L. Schlueter  
Printed Name of Declarant