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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 012211

2006 FEB 15 AM 8:50

MICHAEL A. BROWN
RECORDER




Satisfaction of Mortgage

WFHM - REVERSE MORTGAGES #:339135 "CROWE" Lender ID:1277/6000052606 Lake, Indiana
KNOW ALL MEN BY THESE PRESENTS that Wells Fargo Bank, N.A., successor by merger to Wells Fargo Home Mortgage, Inc., holder of a certain Mortgage to secure the amount of \$139,500.00 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: ANTOINETTE M. CROWE
Original Mortgagee: WELLS FARGO HOME MORTGAGE, INC.
Dated: 03/22/2001 Recorded: 03/30/2001 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2001022859, In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 6827 OHIO AVENUE, HAMMOND, IN 46323-6323

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

Wells Fargo Bank, N.A., successor by merger to Wells Fargo Home Mortgage, Inc.
On February 3rd, 2006


By: 
JOHN LARSEN, Vice President Loan Documentation

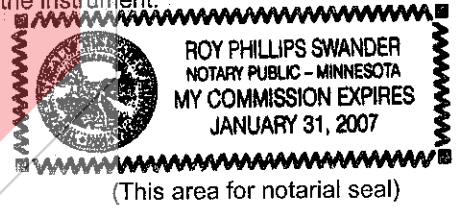


STATE OF Minnesota
COUNTY OF Hennepin

On February 3rd, 2006, before me, THE UNDERSIGNED NOTARY, a Notary Public in and for Hennepin County, in the State of Minnesota, personally appeared JOHN LARSEN, Vice President Loan Documentation, 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,


THE UNDERSIGNED NOTARY
Notary Expires: 1/31



(This area for notarial seal)

Prepared By: Denise Kindt, WELLS FARGO HOME MORTGAGE 2701 WELLS FARGO WAY, MINNEAPOLIS, MN 55467 800-472-3209
When Recorded Return To:
ANTOINETTE CROWE
6827 OHIO AVENUE
HAMMOND, IN 46323-6323

12-200
CK304001
PS

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 declarations are true.

Denise Kindt

Signature of Declarant

Denise Kindt

Printed Name of Declarant

