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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 015411

2006 FEB 28 AM 8:36

MICHAEL A. BROWN
**AMERICAN
GENERAL
FINANCIAL SERVICES**

RELEASE OF MORTGAGE

This certifies, that a certain mortgage executed by DONNA WARREN & WILLIAM WARREN, of the City of MERRILLVILLE County of LAKE State of IN to
AMERICAN GENERAL FINANCIAL SERVICES, INC.
6701 BROADWAY STE 1A
MERRILLVILLE, IN 46410-3531

County, LAKE, on JUNE 2, 2005, securing the principal sum, of \$ 60000.00 and duly recorded in Mortgage Book _____, Page _____, or as Instrument Number 200502951, in the Office of the LAKE County, INDIANA has been fully paid and satisfied, and same is hereby released.
IN WITNESS WHEREOF, the Undersigned has hereunto set its hand by its properly authorized offices this 22nd day of February, 2006.

AMERICAN GENERAL FINANCIAL SERVICES, INC.

By [Signature]
Branch Manager and Attorney-in-Fact

STATE OF INDIANA
COUNTY OF PORTER

NOT OFFICIAL!

The undersigned, a Notary Public, in and for the State and County aforesaid, does hereby certify that the foregoing Release was this day produced to me in said County and State and acknowledged by SCOTT JACOBS Branch Manager and Attorney-in-Fact, of said AMERICAN GENERAL FINANCIAL SERVICES, INC.

_____, to be the act and deed of AMERICAN GENERAL FINANCIAL SERVICES, INC.

_____, and the act and deed of SCOTT JACOBS Branch Manager and Attorney-in-Fact.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 22nd day of February, 2006.

My Commission expires: 12/16/2012

[Signature]
Notary Public, PORTER County,
State of INDIANA

This instrument was prepared by
KELLI ALLEN

UN2561 (10-13-02) Release of Mortgage

[Signature]
(Signed)

\$12
CHK 042016194
CA

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.



Jill Susak

Signature of Declarant

Jill SUSAK

Printed Name of Declarant