STATE OF CHARACTER LAKE COUNTY
FILED FOR RECORD

2006 015507

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MICHAEL A BROWN RECOSUA R

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Satisfaction of Mortgage

CITIMORTGAGE, INC. #:0011904191 "RICHARDSON" Lender ID:5519/1672686101 Lake, Indiana MERS #: 100035580001815768 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC, holder of a certain Mortgage to secure the amount of \$55,000.00 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: GINA M RICHARDSON A MARRIED WOMAN AND Original Mortgagee: FIRST CHICAGO NBD MORTGAGE COMPANY

Dated: 05/07/1999 Recorded: 05/12/1999 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 99040766, In

the offices of the County Recorder of Lake County, in the State of Indiana Property Address: 3230 LAKE PARK AVE, HOBART, IN 46342

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

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC

On February 16th, 2006

the Lake County Factor

TTI K MILLER, Vice-President

STATE OF Maryland **COUNTY OF Carroll**

On February 16th, 2006, before me, Shawn Lyerly, a Notary Public in and for Carroll in the State of Maryland, personally appeared PATTI K MILLER, 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, 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,

Shawn Lyerly

Notary Expires: 10/06/2008

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Sherry L Sheffler, VERDUGO TRUSTEE SERVICE CORPORATION PO BOX 9443, GAITHERSBURG, MD 20898-9443 Prepared By: 1-800-283-7918

When Recorded Return To: GINA M RICHARDSON 7348 NEBRASKA AVE HAMMOND, IN 46323

*PPC*PPCCITM*02/14/2006 09:37:00 PM* CITM01CITM0000000000000002026162* INLAKE* 0011904191 INSTATE_MORT_REL **ASCITM*

604320451

Prescribed by the State Board of Accounts (2005)

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 penalties of perjury, that the foregoing declarations are true.

