2006 019015

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MICHAEL A. BROWN RECORDER

Customer#: 580 Service#: 3022408RL1

Loan#: 54342

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## SATISFACTION OF MORTGAGE

KNOW ALL MEN BY THESE PRESENTS: that the undersigned, holder of a certain mortgage, 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: LENORA HINES, A SPINSTER

Original Mortgagee: CHICAGO METROPOLITAN ASSURANCE COMPANY

Original Mortgage Amount: 17,000.00

Dated: DECEMBER 23, 1992 Recorded on: JANUARY 29, 1993 as Instrument No. 93006893 in DRAWER: --- at CARD:

Property Address: 5717 EAST 10TH AVENUE, 1201 GREEN PLACE, \*, GARY IN 46403-0000

County of LAKE, State of INDIANA

In witness whereof, the undersigned, by the officer duly authorized, has duly executed the foregoing instrument on FEBRUARY

28, 2006

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC

\*1146 DECATUR STREET

This Document is the property of the Lake County Recorder!

By: Vice Président Julie A. Yates

State of <u>CALIFORNIA</u> } County of **ORANGE** } ss.

On FEBRUARY 28, 2006, before me, D. Risetter, a Notary Public, personally appeared Julie A. Yates, 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(ies) and that by his/her/their signature(s) 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.

(Notary Name): D. Risetter

D. RISETTER COMM. # 1452811 TARY PUBLIC CALIFORNIA **ORANGE COUNTY** My comm. expires Dec. 21 2007

PREPARED BY:

T.D. Service Company, 1820 E. First St., Suite 300 Santa Ana, CA 92705, DAN RISETTER

Recording Requested By: T.D. SERVICE COMPANY

And When Recorded Mail To: LENORA HINES 1212 DEKALB STREET **GARY, IN 46403** 

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 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.

This Document the place of the Lake Signature of Declarant derivative of Decla