

2006 025116

2006 MAR 28 AM 9:13

MICHAEL A. BROWN
RECORDER

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<p>Mortgagor's Name And Address</p> <p>Level One Construction, Inc. 9440 Torrance Place Dyer, IN 46311</p> <p>("Mortgagor" whether one or more)</p>	<p>BANK CALUMET NATIONAL ASSOCIATION</p> <p>f/k/a Calumet National Bank 5231 Hohman Avenue Hammond, Indiana 46320</p> <p>("Mortgagee")</p>	<p>Return to:</p> <p>BANK CALUMET 5231 Hohman Avenue Hammond, Indiana 46320</p>
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RELEASE OF MORTGAGE
(Full Satisfaction of Mortgage Debt)

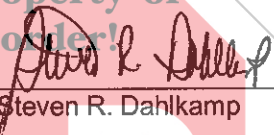
Mortgagee certifies that the indebtedness secured by a mortgage given by Mortgagor dated the 27th day of May, 2005, recorded the 2nd day of June, 2005, in the Office of the Recorder of Lake County, Indiana, as Document No. 2005 044910, (the "Mortgage") has been fully paid and satisfied, and said Mortgage is hereby released.

EXECUTED and delivered this 13th day of March, 2006.

Attest:


Brad C. Meyer
Vice President

BANK CALUMET, NATIONAL ASSOCIATION


By: Steven R. Dahlkamp

Its: Vice President

"Mortgagee"



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TICOR - SCHERERVILLE - 920060399 (Schellenberg)

THE STATE OF INDIANA)
) SS:
THE COUNTY OF LAKE

Before me, a Notary Public in and for the above County and State, personally appeared Steven R. Dahlkamp, the Vice President and Brad C. Meyer, Vice President of Bank Calumet National Association and acknowledged the execution of the foregoing Release of Mortgage for and on behalf of Bank Calumet National Association, pursuant to the authority of the Board of Directors of said Bank, as their free and voluntary act and deed, and as the free and voluntary act and deed of said bank, for the uses and purposes set forth.

WITNESS my hand and Notarial seal this 13th day of March, 2006.

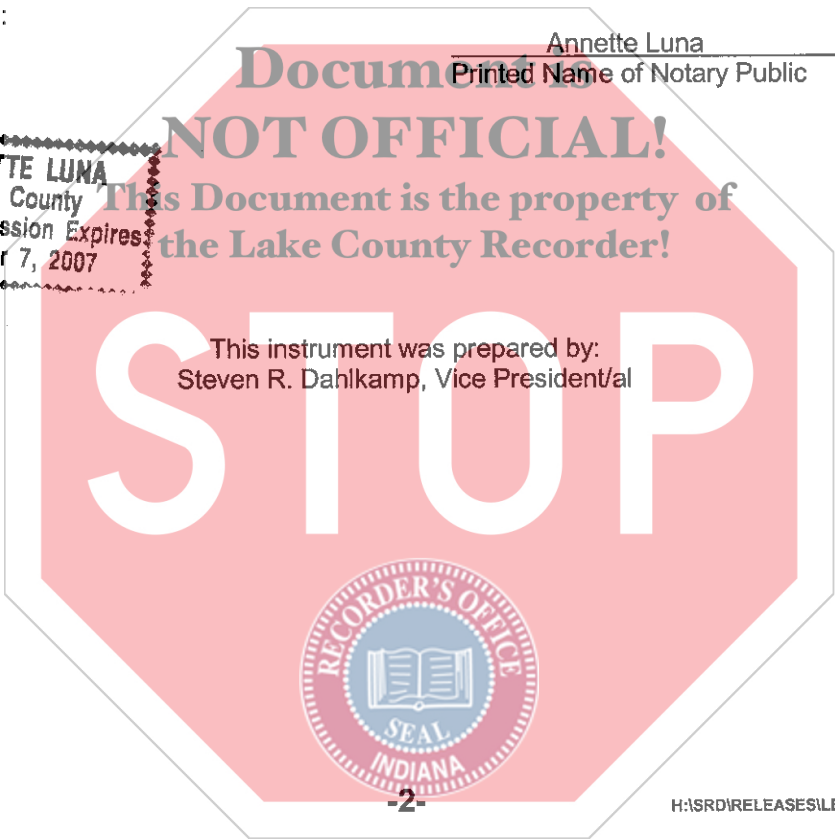
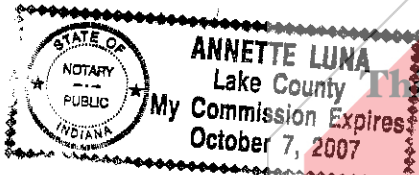
My Commission Expires:
October 7, 2007



Signature of Notary Public

My County of Residence Is:
Lake County, Indiana.

Annette Luna
Printed Name of Notary Public



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.

