2006 025232

FILED FOR RECORD

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MICHAEL A BROWN RECCADER



Satisfaction of Mortgage

GMAC MORTGAGE CORPORATION #:0306664312 "LARA" Lender ID:30000/306664312 Lake, Indiana PIF: 03/13/2006 KNOW ALL MEN BY THESE PRESENTS that GMAC Mortgage Corporation, holder of a certain Mortgage to secure the amount of \$33,371.00 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: PAULO LARA AND NELIDA LARA Original Mortgagee: BANCPLUS MORTGAGE CORP.

Dated: 01/28/1994 Recorded: 02/03/1994 as Instrument No.: 94009026, In the offices of the County Recorder of

Lake County, in the State of Indiana

Property Address: 4829 CAREY ST, EAST CHICAGO, IN 46312

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

GMAC Mortgage Corporation On March 20th 2006 NOT OFFICIAL!

Jocument 18

This Document is the property of the Lake County Recorder!

BARB FROST, Limited Signing Officer

STATE OF Iowa COUNTY OF Black Hawk

On March 20th, 2006, before me, M. CLARK, a Notary Public in and for Black Hawk in the State of Iowa, personally appeared BARB FROST, Limited Signing Officer, 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 offitity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my/hand/and official seal,

Noton, Evrison, 05/17/2007 #

Notary Expires: 05/17/2007 #728505

M. CLARK
NOTARIAL SEAL - STATE OF IOWA
COMMISSION NUMBER 728505
MY COMMISSION EXPIRES MAY 17, 2007

Prepared By: Dave Mcdade, GMAC MORTGAGE CORPORATION 3451 HAMMOND AVENUE, PO BOX 780, WATERLOO, IA 50704-0780 319-236-5400

When Recorded Return To: PAULO LARA

4829 CAREY ST

EAST CHICAGO, IN 46312

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*DSM*DSMGMAC*03/20/2006 08:32:29 PM* GMAC01GMAC000000000000001001264*!NLAKE* 0306664312 INSTATE_MORT_REL *DSM*DSMGMAC*

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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.

