

2006 070336

2006 AUG 14 AM 9:27

MICHAEL BROWN  
RECORDER

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**Satisfaction of Mortgage**

Network Branch #:1402760128397 "LALIBERTE" Lake, Indiana PIF: 07/17/2006  
KNOW ALL MEN BY THESE PRESENTS that CITIFINANCIAL SERVICES, INC., holder of a certain Mortgage to secure the amount of \$19,352.31 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: JASON G. LALIBERTE  
Original Mortgagee: CITIFINANCIAL SERVICES, INC.  
Dated: 11/28/2001 Recorded: 11/30/2001 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2001 097967,  
In the offices of the County Recorder of Lake County, in the State of Indiana  
Property Address: 1245 HOFFMAN ST, HAMMOND, IN 46327

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

CITIFINANCIAL SERVICES, INC.  
On July 31st, 2006

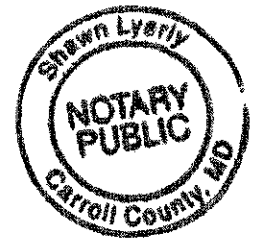
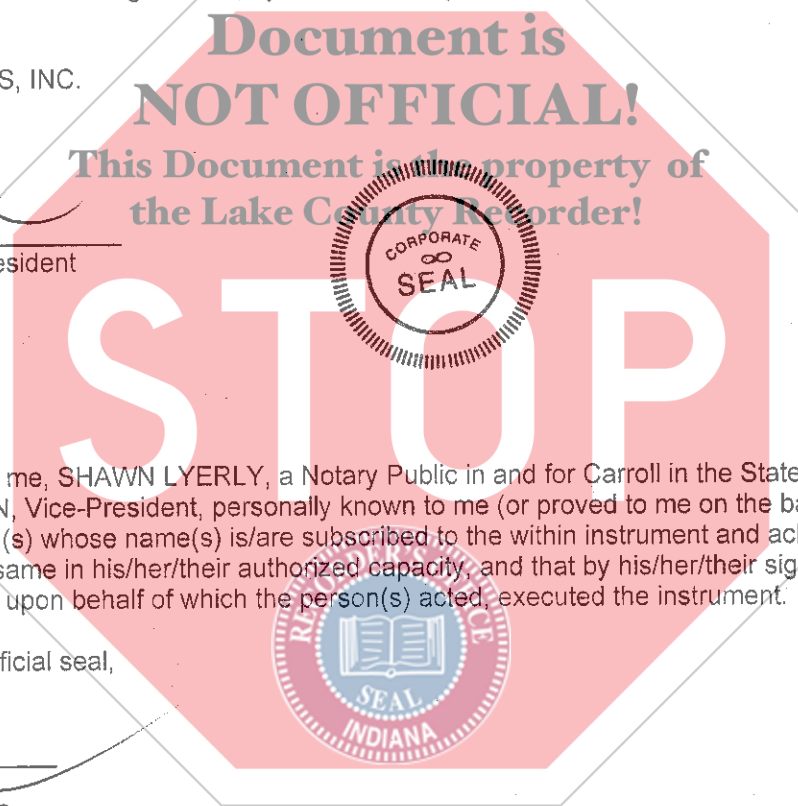
By:   
MERHL GIBSON, Vice-President

STATE OF Maryland  
COUNTY OF Carroll

On July 31st, 2006, before me, SHAWN LYERLY, a Notary Public in and for Carroll in the State of Maryland, personally appeared MERHL GIBSON, 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



Prepared By: Patti K Miller, VERDUGO TRUSTEE SERVICE CORPORATION PO BOX 9443, GAITHERSBURG, MD 20898-9443  
1-800-777-1708

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. Patti K Miller.

When Recorded Return To:

JASON G LALIBERTE  
1245 HOFFMAN ST  
HAMMOND, IN 46327

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14-  
LP  
AK  
604498543

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.

