

2006 092030

2006 OCT 20 AM 9:36

MICHAEL J. GOWN

Release of Mortgage	
DEMOTTE STATE BANK	
PO BOX 346	
LOWELL, IN 46356	
To	
NULIFE VENTURES, INC	
PO BOX 3	
CROWN POINT, IN 46307	
Received for record this _____ day of _____, 20____	
at _____ o'clock _____ M., and recorded in Mortgage Record No. _____ page _____	
Recorded _____ County _____	
Auditor's fee \$ _____	

Le 20065990

CHICAGO TITLE INSURANCE COMPANY

SATISFACTION OF MORTGAGE

This Certifies, That a certain Mortgage executed by NULIFE VENTURES, INC.

to DEMOTTE STATE BANK

on 21ST day of JULY, 2006, calling for \$ 55,000.00

and recorded in Mortgage Record No. _____, Page _____, Document No. 2006 065078,

LAKE County, State of Indiana, has been fully paid and satisfied, and the same is hereby released.

~~WITNESS HIS hand and seal~~ S, this 9TH day of OCTOBER, 2006
~~under the penalties for perjury, that I have taken reasonable care to redact each social security number in this document, unless required by law.~~

Heather Tate
Guy A. Carlson
GUY A. CARLSON, EVP & BRANCH MANAGER

State of Indiana, LAKE County ss,



Before me, the undersigned, a Notary Public in and for said County, this 9TH day of OCTOBER, 2006

PERSONALLY APPEARED GUY A. CARLSON, THE EXECUTIVE VICE PRESIDENT AND BRANCHMANAGER OF DEMOTTE STATE BANK LOWELL BANKING CENTER

acknowledged the execution of the annexed satisfaction of mortgage.

Witness my Hand and official seal.

Heather F. Tate Notary Public
Resident of 1-24-2013 HEATHER F. TATE County

My Commission expires 1-24-2013

This instrument prepared by: HEATHER F. TATE

PLEASE RETURN TO: DEMOTTE STATE BANK
PO BOX 346
LOWELL, IN 46356

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7P
CT

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. Deb Lewis

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. Deb Lewis