

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2007 040610

2007 MAY 18 AM 8:45

MICHAEL A. BROWN
RECORDER



Satisfaction of Mortgage

WASHINGTON MUTUAL - CLIENT 150 #:8466158527 "BONNER" Lender ID:E95/128/1682047926 Lake, Indiana PIF: 05/01/2007
MERS #: 100097700000155652 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that Mortgage Electronic Registration Systems, Inc., holder of a certain Mortgage to secure the amount of \$106,000.00 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: KYLE H BONNER AND HOLLY BONNER
Original Mortgagee: MORTGAGE ELECTRONICS REGISTRATION SYSTEMS, INC
Dated: 06/24/2002 Recorded: 07/02/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2002059328,
In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 2912E CLEVELAND, HOBART, IN 46342

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

Mortgage Electronic Registration Systems, Inc.
On May 10th, 2007

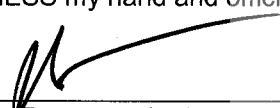
NOT OFFICIAL!
This Document is the property of
the Lake County Recorder!

By: 
Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On May 10th, 2007, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared Jocelyn Tate, Lien Release Assistant Secretary, personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

WITNESS my hand and official seal,


Notary Expires: / /



MIRIAM E. HAPNER
Commission DD385383
Expires October 24, 2008
Bonded Through Troy Fair Insurance 800-388-7010

(This area for notarial seal)

This instrument was prepared by: Amir Cohkovic, WASHINGTON MUTUAL BANK, FA , PO BOX 45179, JACKSONVILLE, FL 32232-5179
1-866-926-8937

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. Amir Cohkovic.

When Recorded Return To:
, WASHINGTON MUTUAL PO BOX 45179, JACKSONVILLE, FL 32232-5179

D.H.M.
12.00
810262366