

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2007 041979

2007 MAY 23 AM 8:53

MICHAEL A. BROWN  
RECORDER



**Satisfaction of Mortgage**

Network Branch #:1402760230623 "MALONEY" Lake, Indiana PIF: 04/28/2007

KNOW ALL MEN BY THESE PRESENTS that CITIFINANCIAL SERVICES, INC., holder of a certain Mortgage to secure the amount of \$101,690.30 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 M. MALONEY  
Original Mortgagee: CITIFINANCIAL SERVICES, INC.  
Dated: 04/30/2005 Recorded: 05/03/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2005 035188,  
In the offices of the County Recorder of Lake County, in the State of Indiana  
Property Address: 6608 ILLINOIS AVE, HAMMOND, IN 46323

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


CITIFINANCIAL SERVICES, INC.  
On May 14th, 2007

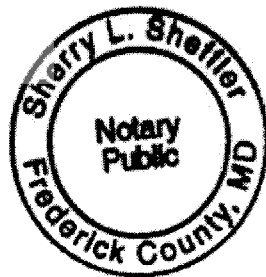
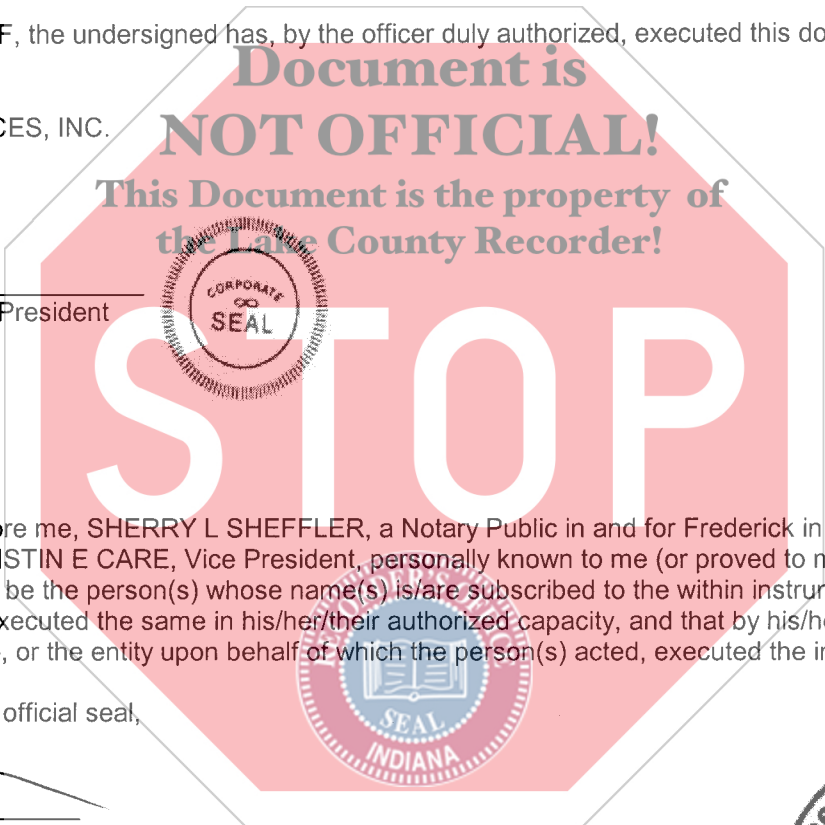
By:   
KRISTIN E CARE, Vice President

STATE OF Maryland  
COUNTY OF Frederick

On May 14th, 2007, before me, SHERRY L SHEFFLER, a Notary Public in and for Frederick in the State of Maryland, personally appeared KRISTIN E CARE, 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,

  
SHERRY L SHEFFLER  
Notary Expires: 12/31/2007



This instrument was prepared by: Shawn Lyerly, 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. Shawn Lyerly.

When Recorded Return To:  
JASON M MALONEY, 6608 ILLINOIS AVE, HAMMOND, IN 46323

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D.A.M.  
12.00  
604874254