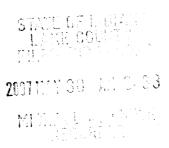
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Satisfaction of Mortgage

WFHM - CLIENT 936 #:0641637665 "JACOBSON" Lender ID:759001/0282055924 Lake, Indiana KNOW ALL MEN BY THESE PRESENTS that Wells Fargo Bank, N.A., holder of a certain Mortgage to secure the amount of \$225,000.00 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: JOHN JACOBSON AND JOANNE KAZMIERSKI, JOINT TENANTS WITH RIGHTS OF

SUVIVORSHIP

Original Mortgagee: BANCGROUP MORTGAGE CORPORATION

Dated: 08/26/2005 Recorded: 09/06/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2005 075573,

In the offices of the County Recorder of Lake County, in the State of Indiana

Property Address: 225 TURIN DR., SCHERERVILLE, IN 46375

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

Wells Fargo Bank, N.A. On <u>May 22nd, 2007</u> NOT OFFICIAL!

This Document is the property of the Lake County Recorder!

Julie Kondrakiewicz, Vice President Loan

Documentation

STATE OF Wisconsin COUNTY OF Milwaukee

On May 22nd, 2007, before me, a Notary Public in and for Milwaukee County in the State of Wisconsin, personally appeared Julie Kondrakiewicz, Vice President Loan Documentation, 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,

Notary Expires 12 184 09

GALINA SHKLOVER
NOTARY PUBLIC STATE OF WISCONSIN

(This area for notarial seal)

This instrument was prepared by: Madeline Thrasher, WELLS FARGO HOME MORTGAGE 11200 W PARKLAND AVE, MILWAUKEE, WI 53224 800-262-5294

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. Madeline Thrasher.

When Recorded Return To:

JOHN JACOBSON, 225 TURIN DR, SCHERERVILLE, IN 46307-9554

*M*T*M*TWFMC*05/22/2007 10:04:26 AM* WFMB02WFMW00000000000000032865* INLAKE* 0641637665 INSTATE_MORT_REL **M*TWFMC*

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