

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2007 052328

2007 JUN 27 AM 10:09

MICHAEL A. BROWN
RECORDER



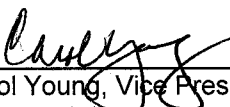
Satisfaction of Mortgage

WFHM - CLIENT 936 #:8470301170 "REED JR" Lender ID:699012/4003819717 Lake, Indiana
KNOW ALL MEN BY THESE PRESENTS that Wells Fargo Bank, N.A., holder of a certain Mortgage to secure the amount of \$112,000.00 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: SAMUEL L. REED, JR AND EBONY S. REED, HUSBAND AND WIFE.
Original Mortgagee: WASHINGTON MUTUAL BANK, FA.
Dated: 12/19/2003 Recorded: 12/30/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2003 135758,
In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 7765 DELAWARE PLACE, MERRILLVILLE, IN 46410

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


Wells Fargo Bank, N.A.
On June 19th, 2007

By: 
Carol Young, Vice President Loan
Documentation

STATE OF Wisconsin
COUNTY OF Milwaukee

On June 19th, 2007, before me, a Notary Public in and for Milwaukee County in the State of Wisconsin, personally appeared Carol Young, 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: 1/23/2011

CAROLYN ALLEN
NOTARY PUBLIC STATE OF WISCONSIN

(This area for notarial seal)

This instrument was prepared by: Carolyn Allen, 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. Carolyn Allen.
When Recorded Return To:
SAMUEL L REED JR, PO BOX 11647, MERRILLVILLE, IN 46411



P.D.M.
12.00 #
461308
O.V. 2.00