

2007 095800

LAKE COUNTY RECORDERS OFFICE
FILED 2007 DEC 6 AM 9:36

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MICHAEL A. BROWN
RECORDER



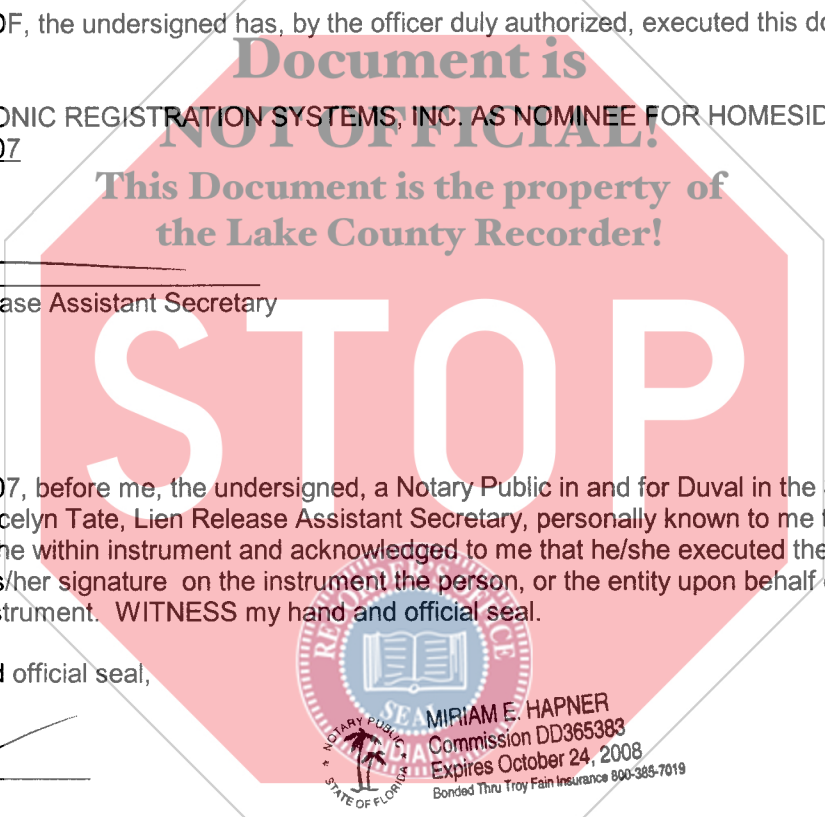
Satisfaction of Mortgage

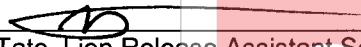
WASHINGTON MUTUAL - CLIENT 150 #:8499486945 "MORALES" Lender ID:842/001/0010075143 Lake, Indiana PIF: 11/16/2007
KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS
NOMINEE FOR HOMESIDE LENDING, INC., holder of a certain Mortgage to secure the amount of \$23,000.00 whose
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: EDWARD W MORALES AND THERESA MORALES, HUSBAND AND WIFE
Original Mortgagee: CALUMET SECURITIES CORPORATION
Dated: 12/08/1977 Recorded: 12/14/1977 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 444518, In the
offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 4731 CLEVELAND ST, GARY, IN 46408

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

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR HOMESIDE LENDING, INC.
On November 27th, 2007



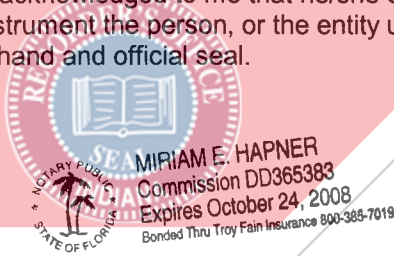
By: 
Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On November 27th, 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: / /



(This area for notarial seal)

This instrument was prepared by: Pablo Diaz, 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. Pablo Diaz.
When Recorded Return To:
, WASHINGTON MUTUAL PO BOX 45179, JACKSONVILLE, FL 32232-5179

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