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MICHAEL A. BROWN
RECORDER



Satisfaction of Mortgage

WASHINGTON MUTUAL - CLIENT 150 #:8400369255 "NOOJIN" Lender ID:C29/001/0187137617 Lake, Indiana PIF: 11/29/2007
MERS #: 100054100000447608 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that WASHINGTON MUTUAL BANK, FA SUCCESSOR IN INTEREST WASHINGTON MUTUAL HOME LOANS, INC., S/B/M TO NORTH AMERICAN MORTGAGE COMPANY, holder of a certain Mortgage to secure the amount of \$37,500.00 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: DEBBIE NOOJIN
Original Mortgagee: NORTH AMERICAN MORTGAGE COMPANY
Dated: 04/29/1998 Recorded: 05/01/1998 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 98031613, In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 4642 SHEFFIEDL AVE, HAMMOND, IN 46327

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

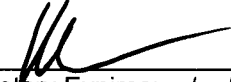
WASHINGTON MUTUAL BANK, FA SUCCESSOR IN INTEREST WASHINGTON MUTUAL HOME LOANS, INC., S/B/M TO NORTH AMERICAN MORTGAGE COMPANY
On December 7th, 2007

By: 
Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On December 7th, 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 DD365383
Expires October 24, 2008
Bonded Thru Troy Fain Insurance 800-385-7015

(This area for notarial seal)

This instrument was prepared by: Ann Covington, 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. Ann Covington.

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



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