

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2007 099893

2007 DEC 21 AM 10:06

MICHAEL A. BROWN
RECORDER



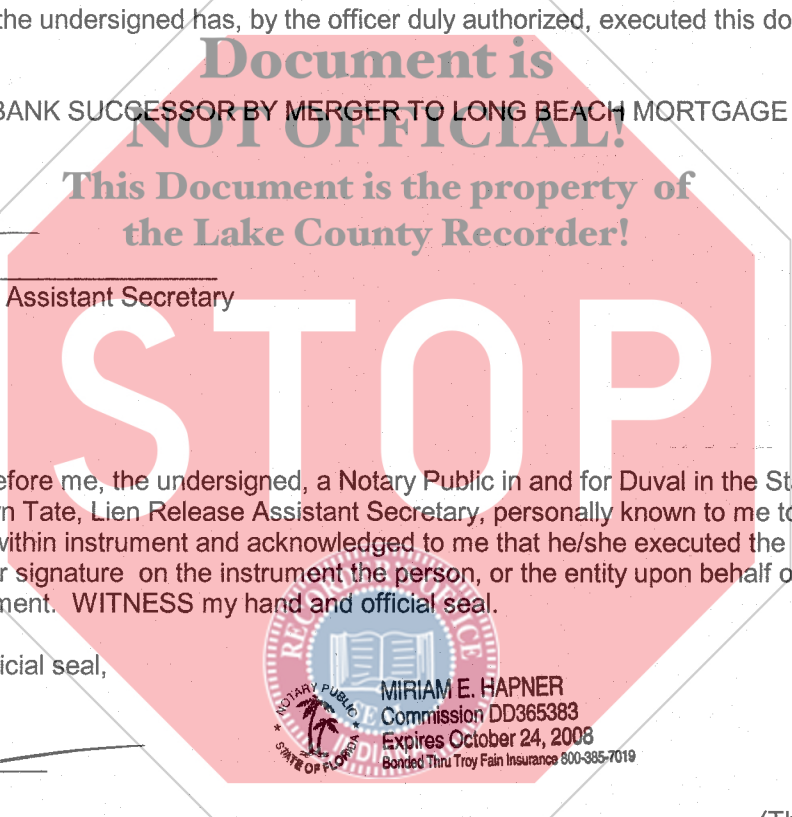
Satisfaction of Mortgage

WASHINGTON MUTUAL - CLIENT 156 #:0695365148 "WINSTON" Lender ID:H47/002/6457353 Lake, Indiana PIF: 12/04/2007
KNOW ALL MEN BY THESE PRESENTS that WASHINGTON MUTUAL BANK SUCCESSOR BY MERGER TO
LONG BEACH MORTGAGE COMPANY, holder of a certain Mortgage to secure the amount of \$48,600.00 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: JOANNA H WINSTON , AN UNMARRIED WOMAN
Original Mortgagee: LONG BEACH MORTGAGE COMPANY
Dated: 04/29/2005 Recorded: 05/05/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2005 036517,
In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 214 E HANOVER ST, HAMMOND, IN 46327

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

WASHINGTON MUTUAL BANK SUCCESSOR BY MERGER TO LONG BEACH MORTGAGE COMPANY
On December 6th, 2007



By:
Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On December 6th, 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: Amir Cohkovic, WASHINGTON MUTUAL BANK, FA , PO BOX 45179, JACKSONVILLE, FL 32232-5179
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. Amir Cohkovic.

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

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