

2008 018893

WASHINGTON MUTUAL
LAKE COUNTY
FILED 07/09/2003
2008 MAR 17 10:59:16
MICHAEL A. BROWN
RECORDER



Satisfaction of Mortgage

WASHINGTON MUTUAL - CLIENT 150 #:8456505281 "HESS" Lender ID:F93/012/4003370063 Lake, Indiana PIF: 02/21/2008
KNOW ALL MEN BY THESE PRESENTS that WASHINGTON MUTUAL BANK, FA, holder of a certain Mortgage to secure the amount of \$166,500.00 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: RAYMOND KENT HESS AND MICHELLE MARIE HESS
Original Mortgagee: WASHINGTON MUTUAL BANK, F.A.
Dated: 06/19/2003 Recorded: 07/09/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2003-071166,
In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 17715 DOWNING DR, LOWELL, IN 46356

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

WASHINGTON MUTUAL BANK, FA
On February 29th, 2008

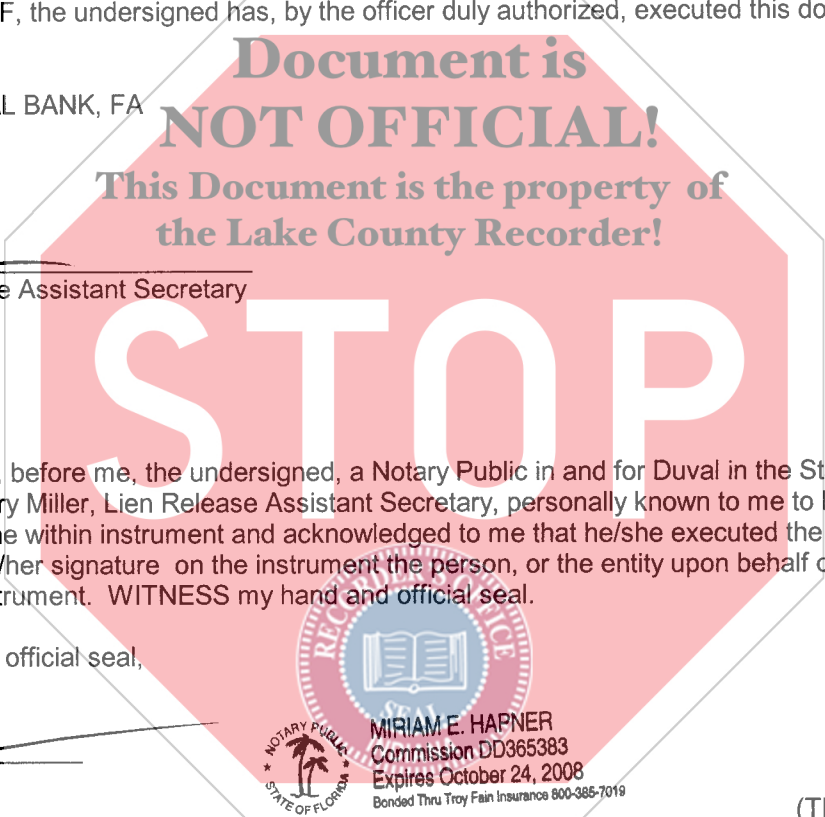
By: *Gary Miller*
Gary Miller, Lien Release Assistant Secretary

STATE OF Florida
COUNTY OF Duval

On February 29th, 2008, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared Gary Miller, 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,

[Signature]
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 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. Amir Cohkovic.

When Recorded Return To:

WASHINGTON MUTUAL PO BOX 45179, JACKSONVILLE, FL 32232-5179



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