

2008 064841

2008 SEP 16 AM 9: 29

MICHAEL A. BROWN RECORDER

Satisfaction of Mortgage

LoanCare Servicing Center, Inc. #:3326907 "DEC" Lender ID:430018/4004157844 Lake, Indiana KNOW ALL MEN BY THESE PRESENTS that FREEDOM MORTGAGE CORPORATION, holder of a certain Mortgage to secure the amount of \$128,300.00 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: MICHAEL J DEC AND RACHEL J CAIRO Original Mortgagee: BANCGROUP MORTGAGE CORPORATION

Dated: 07/22/2004 Recorded: 07/28/2004 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2004063472,

In the offices of the County Recorder of Lake County, in the State of Indiana Property Address: 1102 POPPYFIELD PL, SCHERERVILLE, IN 46375

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

FREEDOM MORTGAGE CORPORATION
On August 21st, 2008

This Document is the property of the Lake County Recorder!

KIM BIGHAM, Vice-President

STATE OF Virginia COUNTY OF Suffolk City

ON August 21st, 2008, before me, SHEQUITA BLOW, a Notary Public in and for the City of Suffolk, State of Virginia, personally appeared KIM BIGHAM, Vice-President, 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,

SHEQUITA BLOW

Notary Expires: 06/30/2011 #7156421

(This area for notarial seal)

PARTIE LA PARTIE DE LA PARTIE D

This instrument was prepared by: Shequita Blow, LoanCare Servicing Center, Inc PO Box 8068, Virginia Beach, VA 23450 1-800-274-6600

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. Shequita Blow.

When Recorded Return To:

Release Department, LoanCare Servicing Center, Inc PO Box 8068, Virginia Beach, VA 23450

*SLB*SLBLCSV*08/21/2008 09:18:11 AM* LCSV01LCSVCONVXXXXXXXXXXX3326907* INLAKE* 3326907 INSTATE_MORT_REL *SLB*SLBLCSV*

12.00

6