

RE: Name: **Ramogene A. Parker**
Address: **2349 West 19th Avenue**
GARY, INDIANA 46404

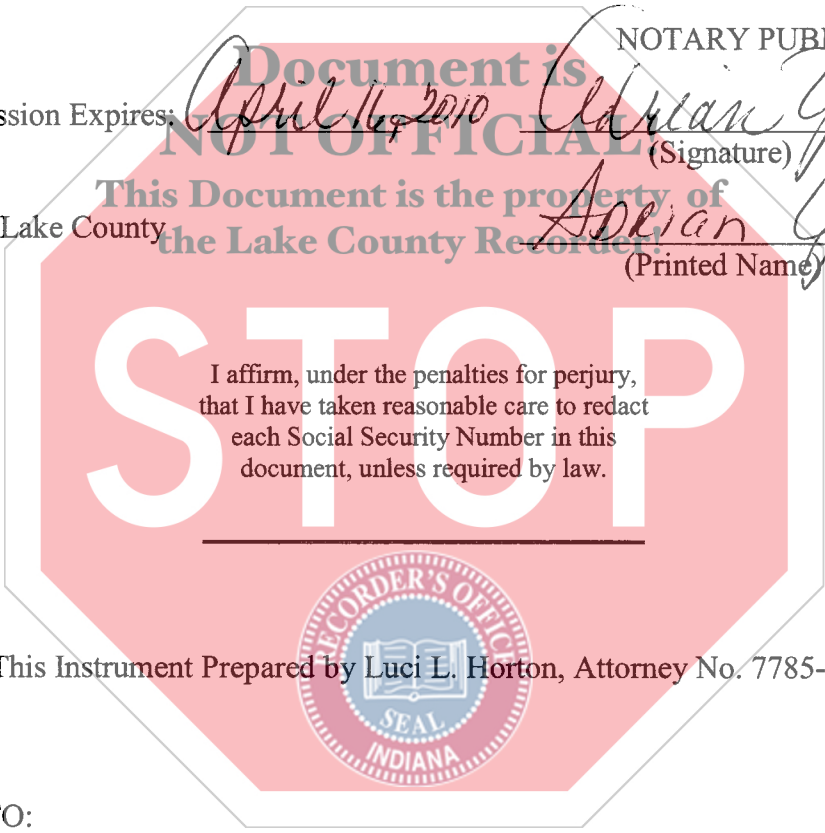
ACKNOWLEDGEMENT

State of Indiana, County of Lake) ss:

Before me, the undersigned, a Notary Public in and for said County and State, this 3rd day of February, 2008, appeared and acknowledged the execution of the annexed and foregoing Waiver, Release, Remise and Satisfaction of Lien.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal.

My Commission Expires: April 16, 2010 Adrian Yates
NOTARY PUBLIC (Signature)
Resident: Lake County Adrian Yates
(Printed Name)



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.

This Instrument Prepared by Luci L. Horton, Attorney No. 7785-45

RETURN TO:
DEPARTMENT OF COMMUNITY DEVELOPMENT
CITY OF GARY, INDIANA
Attention: Name, Housing Specialist
839 Broadway, Suite 302 N
Gary, Indiana 46402