2009 082400 Mechelle A. Sanders **1060 Fillmore Street** GARY, INDIANA

CITY OF GARY, INDIANA **DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT** WAIVER, RELEASE, REMISE and SATISFACTION OF **Housing Rehabilitation Program**

RE:

For Valuable Consideration, the City of Gary, Indiana, Department Planning and Community Development, now known as Department of Community Development, now known as Department of Community Development, certifies that a certain Housing Rehabilitation Program Lien, existing in favor of the City of Gary, Department of Planning and against Mechelle A. Sander's estate, located in Gary, Lake County, Indiana

Commonly known as ADD. To Gary Land Co's. 11th SUB All L. 13 BL 3 in Lake County, Indiana in the Office Recorder of Lake County, Indiana.

which Lien is described as follows: ocument is

STATE OF INDIANA

COUNTY OF LAKE

Housing Rehabilitation Program Lien, In the amount of \$14,940.00 dated November 23, 2004 by and between Mechelle A. Sanders and the City of Gary, Department of Planning and Community Development, recorded as Document No. 2004 108047 on December 20, 2004, in the Office of the Recorder of Lake County Indiana.

is hereby WAIVED, RELEASED, REMISED, RELINQUISHED AND SATISFIED.

CITY OF GARY, INDIANA

go-Hunter, DIRECTOR

DEPARTMENT OF COMMUNITY DEVELOPMENT

Dated: December 1, 2009

15° CCD RN

RE: Mechelle A. Sanders 1060 Fillmore Street GARY, INDIANA

STATE OF INDIANA, COUNTY OF (LAKE) SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 1st day of December 2009 appeared Jacquelyn Drago-Hunter, Director of City of Gary, Indiana Department of Community Development, and acknowledged the execution of the above and foregoing Waiver, Release, Remise and Satisfaction of Emergency Rehabilitation Program Lien.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affix my official seal. ocument is

the property of My Commission Expire RecONOTARY PUBLIC

Resident: Lake County

(Signature)

This instrument prepared by Luci L. Horton, Attorney No. 7785-45

Return To:

DEPARTMENT OF COMMUNITY DEVELOPMENT PERJURY, THAT I HAVE TAKEN REASON. 839 Broadway, Suite 302 North GARY, INDIANA 46402

"I AFFIRM, UNDER THE PENALTIES FOR ABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT. UNLESS REQUIRED BY LAW. PREPARED BY: _