STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2010 059983

2010 OCT 15 AM 9: 28

MICHELLE FAJMAN RECORDER

> COPY____ NON-COM_ CLERK____

PLEASE RETURN TO: First Federal Savings and Loan Association of Hammond 9030 Cline Avenue Highland, IN 46322

SATISFACTION OF MORTGAGE

THIS CERTIFIES that a certa SAVINGS AND	ain mortgage executed by <u>Ral</u>	oh P. Ignas and Bev	erly L. Ignas, to FIRST	Γ FEDERAL
LOAN ASSOCIATION OF I	HAMMOND, INDIANA on th	ne <u>03</u> of <u>January</u> , <u>2</u>	<u>2007</u> mortgaging certa	in Real
Estate described as follows:				
TO THE CITY OF HAMMO	HE WEST 123.2 FEET OF LOT OND, AS PER PLAT THEREO ER OF LAKE COUNTY, INDIA	F, RECORDED IN	N MEADOW GROVE PLAT BOOK 13 PAG	ADDITION, SE 8, IN THE
Was recorded as DOCUME	NT NO. <u>2007 034192</u> in Mortg	age Record	at page ir	n the
Recorder's Office of <u>Lake</u>	COUNTY, INDIANA	and at this date ha	s been fully paid and	satisfied
And the same is HEREBY F	ULLY RELEASED.			
HAMMOND, INDIANA ha	EREOF, the said FIRST FED is caused this instrument to be ice President, this 21 day of Se	signed by its PRES	AND LOAN ASSOC IDENT and its corpor	IATION OF rate seal to be
			AL SAVINGS AND LOA Hammond, Indiana	ιN
A TITLE OF		D Sala	Q French	
ATTEST:		By: John A Frey	Na Freyer ek President	
Monegue &	Kenny	Joint Ja: 1 Tey	SKITESIMEIL	
Morique L. Keyna, Senior V	vice President			
STATE OF INDIANA COUNTY OF LAKE } SS:				
appeared: <u>John A. Freyek</u> PRESIDENT and Vice Pres HAMMOND, INDIANA ar Satisfaction of Mortgage, as	rsigned, a NOTARY PUBLIC, and Monique L. I ident respectively of FIRST Fi nd severally acknowledged that they are authorized so to do, and purposes therein set forth,	Reyna EDERAL SAVINGS It as such Officers the for and on behalf of	personally known to S AND LOAN ASSOC ney signed and deliver	me to be the CIATION OF red the above
			1/1/2	,
	ALICIA WALLACE		run Wal	luci
My commission Expires:	Notary Public, State of Indiana Lake County Miy Commission Expires	Alicia Wa	llace, Notary Public	
<u>April 3, 2018</u>	April 03, 2018	(County of Residen	nce: LAKE	
This document prepared by:	Nicole L. Holman	, Mortgage Loan Servic	cer	
	•		1)	0
	I affirm, under the penalties for perjury, that I have taken reasonable care to		AMOUNT \$ [X	
· ·	redact each Social Security	number in	CASHCHARGE	7.
	this document, unless require	ed by law.	OVERAGE	Zel Marie Carlotte

Nicole L. Holman