

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2010 061512

2010 OCT 21 AM 10:42

MICHELLE R. FAJMAN
RECORDER

Release of Mortgage


LOANCARE, A DIVISION OF FNF SERVICING, INC #5147368 "FOUST" Lender ID:660/0203257944 Lake, Indiana
MERS #: 100031476009090591 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC, AS NOMINEE FOR THE BENEFICIAL OWNER FIRST GUARANTY MORTGAGE CORPORATION, holder of a certain Mortgage to secure the amount of \$152,505.00 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: DAVID FOUST AND ELIZABETH FOUST HUSBAND AND WIFE
Original Mortgagee: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC AS NOMINEE FOR FIRST GUARANTY MORTGAGE CORPORATION
Dated: 10/08/2009 Recorded: 10/19/2009 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2009 070115,
In the offices of the County Recorder of Lake County, in the State of Indiana
Property Address: 441 SEMINOLE DRIVE, LOWELL, IN 46356

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

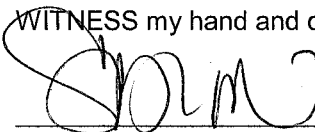
MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC, AS NOMINEE FOR THE BENEFICIAL OWNER FIRST GUARANTY MORTGAGE CORPORATION
On October 5th, 2010

By: 
REGINA WHITE, Vice-President

STATE OF Virginia
COUNTY OF Virginia Beach City

ON October 5th, 2010, before me, SHEQUITA BLOW, a Notary Public in and for the City of Suffolk, State of Virginia, personally appeared REGINA WHITE, 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

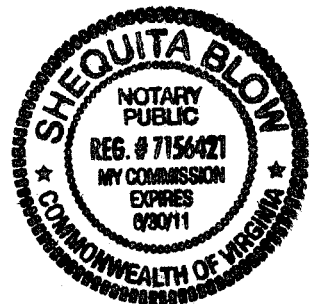
(This area for notarial seal)

This instrument was prepared by: Crystal Davis, LOANCARE, A DIVISION OF FNF SERVICING, 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. Crystal Davis.

When Recorded Return To:

Release Department, LOANCARE, A DIVISION OF FNF SERVICING, INC PO Box 8068, Virginia Beach, VA 23450



*CAD*CADLCSV*10/05/2010 04:13:55 PM* LCSV01LCSV000000000000000000028645* INLAKE* 5147368 INSTATE_MORT_REL *CAD*CADLCSV*

AMOUNT \$ 12-
CASH _____ CHARGE _____
CHECK # 022288
OVERAGE _____
COPY _____
NON-COM _____
CLERK LR