

2011 014777

2011 MAR 16 AM 9: 57

MICH RECURDER

WHEN RECORDED MAIL TO:

DAVID L BENSINGER MEREDITH A BENSINGER 3648 175TH PL HAMMOND IN 46323-2909

SATISFACTION OF MORTGAGE

Indiana

KNOW ALL MEN BY THESE PRESENTS that STATE FARM BANK, FSB holder of a certain mortgage to secure the amount of \$25,000.00, 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 L BENSINGER AND MEREDITH A BENSINGER; AS HUSBAND AND WIFE

Original Mortgagee: STATE FARM BANK, FSB

Dated: 12-12-06 Date Recorded: 12-29-06

Book: N/A Page: N/A Document/Instrument #: 2006 114033

Property Address: 3648 175TH PL, HAMMOND IN 46323 C11 1 1S

Legal Description: LOT THIRTY-NINE (39), ROSECLAIRE SUBDIVISION IN THE CITY OF HAMMOND, AS SHOWN IN PLAT BOOK 40, PAGE 33, IN LAKE COUNTY, INDIANA. SUBJECT TO RESTRICTIONS, RESERVATIONS, EASEMENT, COVENANTS, OIL, GAS OR MINERAL RIGHTS OF RECORD, IF ANY.

Pin #: 26-35-0415-0039 County: LAKE County, State of INDIANA

Related Modification of Mortgage Dated N/A, for increase to \$N/A, Recorded on N/A in Book N/A, Page N/A, Document #N/A

IN WITNESS WHEREOF, the said STATE FARM BANK, FSB, by JEFF WHITBECK its AUTHORIZED OFFICER on March 7, 2011 has hereunto set its corporate name and seal.

(corporate seal)

STATE FARM BANK, FSB

By/JEFF WHITECK Title: AUTHORIZED OFFICER

State of WISCONSIN) s.s County of DANE)

This instrument was acknowledged before me on March 7, 2011 by JEFF WHITBECK, AUTHORIZED OFFICER of STATE FARM BANK, FSB, an ILLINOIS CORPORATION, on behalf of said corporation.

NO TO SOLUTION TANKS

TANYAL GOTH

Notary Public, State of Wisconsin My commission expires 08-14-2011

This Instrument was Prepared By State Farm Bank
PO Box 5961
Madison, WI 53705-0961
Kevin Bavlnka, Paid Loan Processor (877) 638-0158 x 5451

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. Kevin Bavlnka, Loan Processor

AMOUNT \$ 12

CASH ____ CHARGE ___
CHECK # 102039

OVERAGE ____
COPY ____
NON - COM ___
CLERK ___ AO