

THIS FORM HAS BEEN APPROVED BY THE INDIANA STATE BAR ASSOCIATION FOR USE BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS AND INSERTION OF SPECIAL CLAUSES, CONSTITUTES THE PRACTICE OF LAW AND MAY ONLY BE DONE BY A LAWYER.

RELEASE OF MORTGAGE

For a valuable consideration, it is hereby certified that a certain mortgage executed by _____

NORMAN WOLFORD AND RUTH WOLFORD, Husband and Wife

2011 04 27 26

_____, on the 21st day of January 1988, securing the principal sum of One Thousand Five Hundred and no/100 Dollars (\$1,500.00)

which mortgage was duly recorded as Document Number 961069 or in Mortgage Record _____

at pages _____ in the office of the Recorder of Lake

County, Indiana, on 25th day of January, 1988, and subsequently assigned to the _____

day of _____, 19____ to the _____

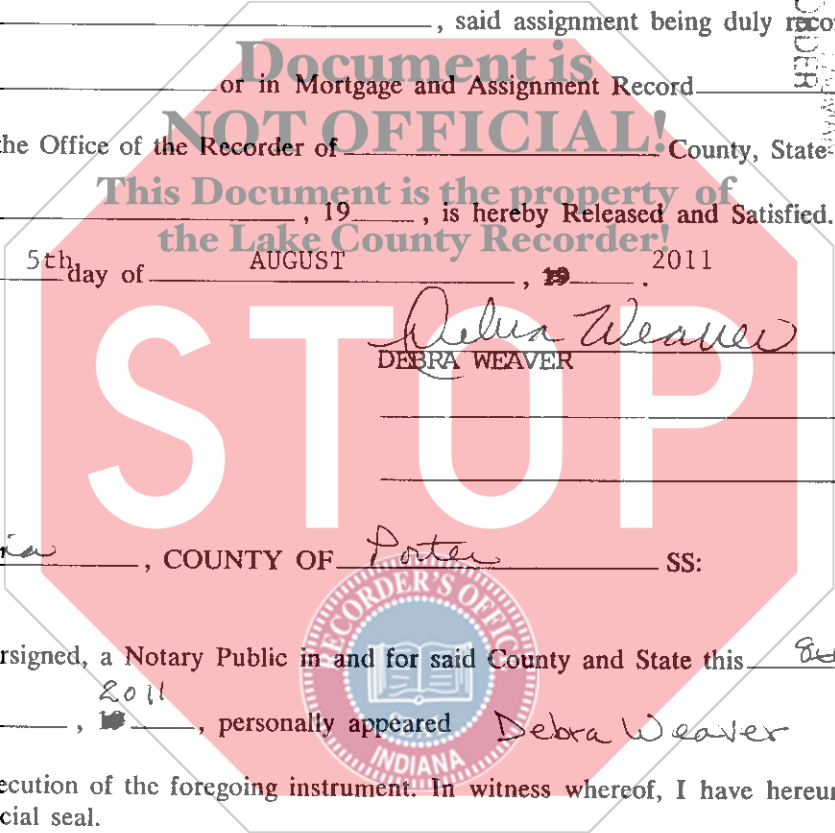
_____, said assignment being duly recorded as Document _____

Number _____ or in Mortgage and Assignment Record _____

in the Office of the Recorder of _____ County, State of Indiana on the _____

day of _____, 19____, is hereby Released and Satisfied.

Dated this 5th day of AUGUST, 2011



NOTARY RECORDER
2011 AUG - 9 PM 3:34
FILED FOR RECORDER
LAKE COUNTY INDIANA

Debra Weaver
DEBRA WEAVER

STATE OF Indiana, COUNTY OF Porter SS:

Before me, the undersigned, a Notary Public in and for said County and State this 5th day of _____

August, 2011, personally appeared Debra Weaver

and acknowledged the execution of the foregoing instrument. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

My commission expires:



Carol L. Trathen

NOTARY PUBLIC

Resident of Porter County.

STATE OF _____, COUNTY OF _____, SS:

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared _____

_____, President and _____, Secretary known

to me to be such Officers of _____ and acknowledged the execution of the foregoing Release of Mortgage, as such officers, for and on behalf of said Corporation and by authority of its Board of Directors.

Witness my hand and notarial seal this _____ day of _____, 19____.

My commission expires:

"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."
PREPARED BY: [Signature]

NOTARY PUBLIC

Resident of _____ County.

This instrument was prepared by Mark S. Lucas, 1000 E. 80th, Merrillville, IN, Attorney At Law

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