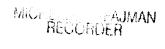


2012 040679

2012 JUN 20 AM 9: 25



Release of Mortgage

LOANCARE, A DIVISION OF FNF SERVICING, INC #:2661015 "SAVICKIS" Lender ID:491/1692254813 Lake, Indiana MERS #: 100021800046500084 SIS #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE SOLELY FOR FREEDOM MORTGAGE CORPORATION, holder of a certain Mortgage to secure the amount of \$235,350.00 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: CHARLES A SAVICKIS, A SINGLE PERSON Original Mortgagee: WASHTENAW MORTGAGE COMPANY

Dated: 08/13/2003 Recorded: 08/22/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2003 087953,

In the offices of the County Recorder of Lake County, in the State of Indiana

Property Address: 9917 WHITEHALL GDN, MUNSTER, IN 46321

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

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE SOLELY FOR FREEDOM MORTGAGE CORPORATION This Document is the property of

the Lake County Recorder!

Assistant Secretary

STATE OF Vilginia

COUNTY OF Virginia Beach City

On June 8th, 2012, before me, PHYLLIS BRABBLE, a Notary Public in and for Virginia Beach City in the State of Virginia, personally appeared REGINA WHITE, Assistant Secretary, 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,

PHYLLIS BRABBLE

Notary Expires: 12/31/2012 #7226025

(This area for notarial seal)

This instrument was prepared by:

Paula.scott-russell, 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. Paula scott-russell.

When Recorded Return To:

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

*PSR*EBLCSV*06/08/2012 04:14:01 PM* LCSV01LCSV0000000000000000071433* INLAKE* 2661015 INSTATE_MORT_REL **EBLCSV*

AMOUNT \$_ CASH__ ___CHARGE CHECK#_D4 5 OVERAGE. COPY_ NON-CONF. DEPUTY_