

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2013 051224

2013 JUL 16 AM 8:55

SATISFACTION OF MORTGAGE

MICHAEL B. BROWN
RECORDER

THIS CERTIFIES that a certain Mortgage executed by **THE FIRST BANK OF WHITING AS TRUSTEE UNDER TRUST AGREEMENT DATED DECEMBER 27, 1984, KNOWN AS TRUST NO. 1846**, to Centier Bank, f/k/a The First Bank of Whiting, an Indiana corporation, dated **APRIL 22, 1987**, in the amount of **\$250,000.00** and recorded as **913152** and recorded on **APRIL 23, 1987**, in the Recorder's Office of **LAKE** County, State of Indiana has been fully paid and satisfied and the same is hereby released.

IN WITNESS WHEREOF, the said Centier Bank, has caused this instrument to be signed by Marie Carter, Loan Operations Officer, this day **JUNE 5, 2013**.

14942
NORTHWEST INDIANA TITLE
162 WASHINGTON STREET
LOWELL, IN 46356
219-696-0100

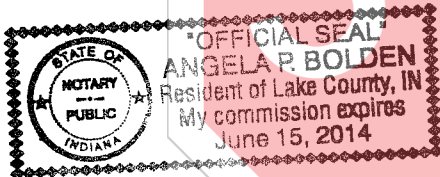
CENTIER BANK

By Marie Carter
Marie Carter
Loan Operations Officer

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NOT OFFICIAL!
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the Lake County Recorder!

STATE OF INDIANA, LAKE COUNTY, ss:

Before me, the undersigned, Notary Public in and for said State and County, this day **JUNE 5, 2013**, personally appeared Marie Carter known to me to be such officer, she signed and delivered the annexed satisfaction of mortgage, pursuant to the authority of the Board of Directors of said Bank, as their free and voluntary act and deed, and as the free and voluntary act and deed of said bank, for the uses and purposes therein set forth.



Witness my hand and official seal.

Angela R. Bolden
Notary Public

This instrument prepared by: **TERI MULHOLLAND**, Loan Servicing Associate, Centier Bank, 600 E. 84th Ave. Merrillville, IN 46410. I affirm, under penalties for perjury, that I have taken reasonable care to redact each social security number in this document, unless required by law.
Teri Mulholland, **TERI MULHOLLAND**, Loan Servicing Associate of Centier Bank.

Return Release To: Centier Bank, Attn: Loan Servicing, 600 E. 84th Avenue, Merrillville, IN 46410

AMOUNT \$ 12
CASH _____ CHARGE _____
CHECK # 1318
OVERAGE _____
COPY _____
NON - COM _____
CLERK dr