

2014 008469

STATE OF INDIANAL LAKE COUNTY FIEED FOR RECORD

2014 FEB 13 AM 9: 22

MICHAEL B. BROWN RECORDER

Release of Mortgage

This is to Certify, release of record, as to the insured real estate, of mortgage from Chris Apostol and Alma D. Apostol, husband and wife to Household Finance Corporation III, dated June 23, 2005 and recorded June 27, 2005, as Instrument No. 2005-052917.

Legal description:

Lot Eighty Two (82), Block One (1), Plum Creek Village to the Town of Schererville, Lake County, Indiana, as shown in Plat Book 46, page 101.

Commonly known as: 1310 Willow Lane, Schererville, IN 46375

IN WITNESS WHEREOF, the Mortgagee has caused this Release of Mortgage to be executed by its duly authorized representative this
Docum Household finance corporation III
NOT OFFICIAL!
This Document is the Printed: Title: Vice President and Asst. Secretary the Lake County Record Administrative Services Division
State of
County of
Before me the undersigned a Notary Public in and for said County and State, this day of
, 2013, personally appeared of Household Finance Corporation III and acknowledged the execution of the foregoing Release of Mortgage.
My Commission Expires:
Notary Public:
Resident of County,
I affirm under penalties of perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. Alan F. Kolb, Attorney at Law
This Instrument Decreased

This Instrument Prepared By: Alan F. Kolb, Attorney at Law, 50 S. Meridian Street, Suite 600, Indianapolis, IN 46204 Phone: (317) 681-6090, Fax: (317) 681-6091, E-mail:alankolbets@aol.com

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CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California		
County of Los Angeles		
Tami Flores		
On December 24, 2013 before me,	, Notary Public	
on <u>seconder 2.7, 20.10</u> before me,	(Here insert name and title of the officer)	
personally appeared********************************		
who 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(sho)/they executed the same in his her/their authorized capacity(ies), and that by his(her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.		
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.		
	TAMI FLORES	
WITNESS my hand and official seal. OCHIMENT Appeles Course		
the Thomas	My Comm. Expires Jan 24, 2017	
Signature of Notary Public	of the terminal of the termina	
ADDITIONAL OPTIONAL INFORMATION INSTRUCTIONS FOR COMPLETING THIS FORM		
DESCRIPTION OF THE ATTACHED DOCUMENT	Any acknowledgment completed in California must contain verbiage exactly as	
DESCRIPTION OF THE ATTACHED DOCUMENT	appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a	
Title of document or description	document is to be recorded outside of California. In such instances, any alternative	
(Title or description of attached document)	acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in	
Title or description continued	California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.	
(Title or description of attached document continued)		
Number of Pages Document Date	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of potarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. 	
(Additional information)	• The hotary public must print his or her name as it appears within his or her	
	Print the name(s) of document signer(s) who personally appear at the time of notarization.	
CAPACITY CLAIMED BY THE SIGNER	• Indicate the correct singular or plural forms by crossing off incorrect forms (i.e.	
☐ Individual (s)	he/sbe/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.	
☐ Corporate Officer	 The notary seal impression must be clear and photographically reproducible. 	
(Title)	Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.	
☐ Partner(s)	Signature of the notary public must match the signature on file with the office of	
☐ Attorney-in-Fact	the county clerk. Additional information is not required but could help to ensure this	
☐ Trustee(s)	acknowledgment is not misused or attached to a different document.	
☐ Other	 Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a 	
	corporate officer, indicate the title (i.e. CEO, CFO, Secretary).	
	Securely attach this document to the signed document	