



2014 080 479

2014 DEC 18 AH 10: 23

MICHAEL D. EROWN
RECORDER
THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. THE SELECTION OF A
FORM OF INSTRUMENT BILLING IN BLANK SPACES STRUCKLOSE CONTRIBUTION OF THE STATE OF INDIANA BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS, AND INSERTION OF SPECIAL CLAUSES, MAY CONSTITUTE THE PRACTICE OF LAW, WHICH SHOULD ONLY BE DONE BY A LAWYER.

RELEASE OF MORTGAGE

For valuable conside	eration, it is certified that a cer	tain mortgage executed		
				, on the <u>24th</u>
day of <u>May, 1978</u>	, securing the princi	pal sum of <u>Five Tho</u>	usand and no/100	
			Dollars (\$ _5	,000.00
which mortgage was duly rec	corded (as Document Number	470438		_) (in Mortgage Recor d
at-pa	ge(s)[strik	co-one] in the Office of t	he Recorder of <u>Lake</u>	
County, Indiana, on the2		1070	, is rele	ased and satisfied.
Dated this 11	day_of_Dec	ember, 2014		
	rtine, Do			
Signature	/_X	Signature		
DONNA MARTINEZ	NOT			
Printed	This Doorem	Printed ent is the pro	norty of	
		· · · · · · · · · · · · · · · · · · ·		
	the Lake	County Reco	rder!	
By:		By:		
(PRINTED NA	ME AND OFFICE)		(PRINTED NAME AN	D OFFICE)
STATE OF INDIANA	COLINT	Y OF PORTER	SS:	
Before me, the undersigned,	a Notary Public in and for said	d County and State, pers	onally appeared DONN	A MARTINEZ
		THE BER'S OF THE		
and acknowledged the execu	tion of the foregoing Release	of Mortgage to be his, he	er or their voluntary act a	nd deed.
Witness my hand ar	nd notarial seal this 11	day ofDecembe	r 2014	·
		WOIANA HILL		

My commission expires: 06/11/2017	Signature_	anice	n.Wu	(irams)
Resident of PORTER County		TANICE N. W	ILLIAMS	, Notary Public
STATE OF, COUNTY	OF		S SEAL	LANICE N. WILLIAMS Porter County My Commission Expires June 11, 2017
Before me, the undersigned, a Notary Public in and				
	and			,
the	and			respectively
of			,	who acknowledged
the execution of the foregoing Release of Mortgage as such				
Witness my hand and notarial seal this				
My commission expires:	_ Signature _			
Resident ofCount	y Printed			, Notary Public
This instrument was prepared by Daniel Ostojic,		ral Ave., Po	ortage, IN	Attorney at Law
Attorney Identification No. 9975-64 MAIL TO: Daniel Ostojic, 6287 Central	lve., Por	CIAL 46	368	
This Docume	nt is the	property	of	NC. (REV. 2/97, 4/99)
I affirm, under the that I have taken reeach Social Security document, unless red	easonable y number quired by	care to red		