

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 006276

2016 JAN 28 AM 9:27

MICHAEL B. BROWN
RECORDER

Release of Mortgage



WFHM - CLIENT 708 #:0008761934 "SMITH" Lender ID:724045/412974002 Lake, Indiana
KNOW ALL MEN BY THESE PRESENTS that Wells Fargo Bank, N.A., holder of a certain Mortgage to secure the amount of \$49,950.00 whose parties, dates and recording information are below, does hereby acknowledge full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said Mortgage.

Original Mortgagor: EILEEN M SMITH
Original Mortgagee: FLEET MORTGAGE CORP.
Dated: 08/25/1989 Recorded: 08/30/1989 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 055100, In the offices of the County Recorder of Lake County, in the State of Indiana

Property Address: 1837 N RENSSELAER ST, GRIFFITH, IN 46319

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

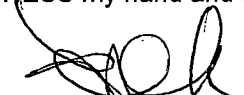
Wells Fargo Bank, N.A.
On January 12th, 2016

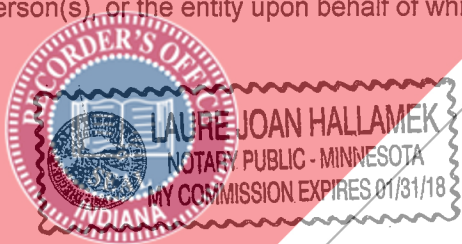
By: 
IRIS BERGERSON, Vice President Loan Documentation

STATE OF Minnesota
COUNTY OF Hennepin

On January 12th, 2016, before me, LAURE JOAN HALLAMEK, a Notary Public in and for Hennepin in the State of Minnesota, personally appeared IRIS BERGERSON, Vice President Loan Documentation, 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,


LAURE JOAN HALLAMEK
Notary Expires: 01/31/2018



(This area for notarial seal)

This instrument was prepared by:
Christina Cooper, WELLS FARGO HOME MORTGAGE 2701 WELLS FARGO WAY, X9901-L1R, MINNEAPOLIS, MN 55467 800-288-3212

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. Christina Cooper.

When Recorded Return To:
LIEN RELEASE DEPT, WELLS FARGO HOME MORTGAGE MAC X9901-L1R P.O. BOX 1629, MINNEAPOLIS, MN 55440-9790

AMOUNT \$ 121.00-
CASH _____ CHARGE _____
CHECK# 2029885635
OVERAGE _____
COPY _____
NON-CONF _____
DEPUTY MS