2016 054920

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2016 AUG 12 AM 8: 46

MICHAEL B. BROWN RECORDER

Release of Mortgage

: [8] | June | 1947 | 1948 | 1948 | 1948 | 1948 | 1948 | 1948 | 1948 | 1948 | 1948 | 1948 | 1948 | 1948 | 1948

WF HOME EQUITY #:45161978250001 "HAMMONS" Lake, Indiana

KNOW ALL MEN BY THESE PRESENTS that WELLS FARGO BANK, N.A., successor by merger to WELLS FARGO BANK WEST, N.A., holder of a certain Mortgage to secure the amount of \$18,000.00 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: JOHN U HAMMONS AND MONICA S HAMMONS Original Mortgagee: WELLS FARGO BANK WEST, N.A.

Dated: 08/22/2001 Recorded: 09/26/2001 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2001 077989,

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

Property Address: 10809 W 133RD LANE, CEDAR LAKE, IN 46303

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

WELLS FARGO BANK, N.A., successor by On August 2nd, 2016

This Document is the property of

the Lake County Recorder! e President

DARLA LAVIGNE PHII Loan Documentation

STATE OF Minnesota **COUNTY OF Hennepin**

On August 2nd, 2016, before me, TERRI LYNN WESTGARD, a Notary Public in and for Hennepin in the State of Minnesota, personally appeared DARLA LAVIGNE PHILIPCZYK, 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 person(s), or the entity upon behalf of which the person(s) acted, executed the instrument

WITNESS my hand and official seal,

'éwo all station TERRI LYNN WESTGAR Notary Expires: 01/31/2020

TERRITYNN WESTGAPD

(This area for notarial seal)

This instrument was prepared by:

Darla Lavigne Philipczyk, WELLS FARGO BANK, N.A. 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. Darla Lavigne Philipczyk.

When Recorded Return To:

LIEN RELEASE DEPT, WELLS FARGO BANK, N.A. MAC X9901-L1R P.O. BOX 1629, MINNEAPOLIS, MN 55440-9790

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