

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 049974

2017 AUG 10 AM 10:05

MICHAEL B. BROWN
RECORDER

Customer#: 686/1 Service#: 4714425RL1



Loan#: 0012770483

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SATISFACTION OF MORTGAGE

KNOW ALL MEN BY THESE PRESENTS: that the undersigned, current beneficiary, whose parties, dates and recording information are below, does hereby acknowledge that full payment has been received and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said mortgage.

Original Mortgagor: GABRIEL ARCAS AND OTILIA ARCAS

Original Mortgagee: NATIONAL CITY MORTGAGE A DIVISION OF NATIONAL CITY BANK

Original Mortgage Amount: 120,000.00

Dated: OCTOBER 16, 2009 Recorded on: NOVEMBER 02, 2009 as Instrument No. 2009 073071 in DRAWER: --- at CARD: ---

Property Address: 826 SPRUCE LN, SCHERERVILLE, IN 46375-0000

County of LAKE, State of INDIANA

In witness whereof, the undersigned, by the officer ~~duly authorized, has duly executed~~ the foregoing instrument on

JUL 12 2017


METROPOLITAN LIFE INSURANCE COMPANY BY SELECT PORTFOLIO SERVICING, INC. AS ATTORNEY IN FACT

Power of Attorney was recorded simultaneously herewith.

By: 
Joyce Ann Garcia, Assistant Secretary



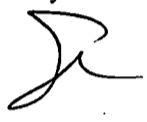


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A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of CALIFORNIA }
County of ORANGE } ss.

On JUL 12 2017, before me, **S. Caver**, a Notary Public, personally appeared **JoyceAnn Garcia**, 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/she/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.
Witness my hand and official seal.



(Notary Name): **S. Caver**

THIS INSTRUMENT WAS PREPARED BY:
T.D. Service Company
LR Department
4000 W Metropolitan Dr Ste 400
Orange, CA 92868
SAMANTHA R CAVER

Recording Requested By:
T.D. SERVICE COMPANY

And When Recorded Mail To:
T.D. Service Company
PO BOX 11988
Santa Ana, CA 92711-9826

