Prepared By:Niranjana Panchal
RECORDING REQUESTED BY:
Dovenmuehle Mortgage, Inc.
1 Corporate Drive,Suite 360
Lake Zurich,II 60047

AND WHEN RECORDED MAIL TO:
Dovenmuehle Mortgage, Inc.
1 Corporate Drive, Suite 360
Lake Zurich, IL 60047

2020-089534

2020 Dec 8

8:32 AM

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD MICHAEL B BROWN RECORDER

Loan Number: 1457755724

Lender ID:73F

MORTGAGE RELEASE SATISFACTION AND DISCHARGE DOCUMENT 1S

IN CONSIDERATION of the payment and full satisfaction of all indebtedness secured by that certain Mortgage described below, BMO HARRIS BANK NATIONAL ASSOCIATION, holder of said Mortgage, does hereby release, satisfy, and discharge said Mortgage in full and does hereby consent that the same be canceled and discharged of record. Borrower(s): YVONNE J. GRALA HABLEY AND KINTSERLY ALWARNER, JOINT TENANTS WITH RIGHTS OF SURVIVORSHIP Amount of Note: \$40,000.00 Date of Mortgage: 07/17/2000 Recording Date: 07/21/2000 Instrument No: 2000 051599 Book: N/A Page: N/A

Property Address: 2331 99TH STREET, HIGHLAND IN,46322 and recorded in the official records of LAKE County, State of Indiana affecting Real Property and more particular, described on said Mortgage referred to herein.

IN WITNESS WHEREOF, the undersigned has caused these presents to be executed on this date of 11/03/2020.

BMO HARRIS BANK NATIONAL ASSOCIATION

By: DAVID Q FAGAN, VICE PRESIDENT

Kathy Serra

25 1643174 20 STATE OF Illinois
COUNTY OF LAKE

On 11/03/2020 Before me TRAVIS BONVILLAIN, Notary Public, personally appeared DAVID Q FAGAN, VICE PRESIDENT of

**BMO HARRIS BANK NATIONAL ASSOCIATION**personally known to me (or proved to me on the basis of satisfactory evidence), to be the person

whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument, the person or entity upon behalf of which the person acted, executed the instrument. Witness my hand and official seal. laffirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security Number in this document unless required by law.



## **CERTIFICATE OF PROOF**

WITNESS to the signature (s) on the foregoing instrument to which this Proof is attached.
Margarita Maiewski
Witness Printed Name
Witness Printed Name
PROOF:
STATE OF JULINOIS
COUNTY OF REPORT IS
NOTOPPICIALL
Before me a Notary Public in and for said County and State, Dated on
personally appeared the above-named WITNESS to the foregoing instrument who, being by me
personally appeared the above-named WITNESS to the foregoing instrument who, being by me duly sworn, did depose and say that he/she knows WITNESS-
be the individual(s) described in and who executed the foregoing instrument: that said WITNESS was present and saw said GRANTOR(S).
the same: and the said WITNESS at same time subscribed his/her name as a witness thereto
NOTARY DUBLIC SIGNATURE
TIVA M GOODDIN AVIT
NOTARY PRINTED NAME
Notary Name exactly as Commission Notary Public- State of Seal My Commission Expires: 1-13-2024  My Commission No: 913358