

# NOT AN OFFICIAL DOCUMENT

Prepared By: Zeel Ravat  
RECORDING REQUESTED BY:  
Dovenmuehle Mortgage, Inc.  
1 Corporate Drive, Suite 360  
Lake Zurich, IL 60047

GINA PIMENTEL  
RECORDER  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2021-072227

9:01 AM 2021 Dec 20

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

Loan Number: 1457649539  
Lender ID: 73B

## MORTGAGE RELEASE SATISFACTION AND DISCHARGE

IN CONSIDERATION of the payment and full satisfaction of all indebtedness secured by that certain Mortgage described below, **BMO HARRIS BANK N.A.**, 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): **LAVONNE L. NICHOLSON, AN UNMARRIED WOMAN** Amount of Note: **\$99,200.00** Date of Mortgage: **05/21/2014** Recording Date: **05/29/2014** Instrument No: **2014 030906** Book: **N/A** Page: **N/A** Property Address: **403 SWAN DR, #1D, DYER IN, 46311** 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 **12/06/2021**.

**BMO HARRIS BANK N.A.**

By:   
By: **KELLY B BRAND, AUTHORIZED SIGNER**

Witness:

  
**Kathy Serra**

25-6  
ck. 1827428  
D

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STATE OF Illinois  
COUNTY OF LAKE



On **12/06/2021** Before me **MICHELLE CALLIGER**, Notary Public, personally appeared **KELLY B BRAND**,  
**AUTHORIZED SIGNER** of

**BMO HARRIS BANK N.A.**, 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. 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.

MICHELLE CALLIGER, Notary Public

My Commission Expires: 5/6/2025



MICHELLE CALLIGER  
OFFICIAL SEAL  
Notary Public, State of Illinois  
My Commission Expires  
May 06, 2025

Property of Lake County Recorder