

NOT AN OFFICIAL DOCUMENT

Record and Return To:

FIFTH THIRD BANK
LIEN RELEASE
38 FOUNTAIN SQUARE PLAZA
MD# 1MOBB1
CINCINNATI, OH 45273

2023-510740
04/14/2023 09:41 AM
TOTAL FEES: 25.00
BY: JAS
PG #: 1

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
GINA PIMENTEL
RECORDER

This instrument was Prepared By:

ANNA SANTIAGO
FIFTH THIRD BANK
5001 KINGSLEY DRIVE
MD# 1MOBB1
CINCINNATI, OH 45227
800-972-3030

Loan #: ***4597

Investor Loan #: 101285674

MORTGAGE RELEASE SATISFACTION AND DISCHARGE

IN CONSIDERATION of the payment and full satisfaction of all indebtedness secured by that certain Mortgage described below, **FIFTH THIRD BANK, NATIONAL ASSOCIATION, SBM TO FIFTH THIRD MORTGAGE COMPANY, 5001 KINGSLEY DR, CINCINNATI, OH 45227** 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): IRVING TRUJILLO

Original Mortgagee: **FIFTH THIRD MORTGAGE COMPANY**

Amount of Note: **\$98450.00**

Date of Mortgage: **08/27/2003** Recording Date: **09/03/2003** Instrument No: **2003 090912** Book: **N/A** Page: **N/A**

Property Address: **7147 MADISON AVENUE, HAMMOND, IN 46324**

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, this instrument was executed, signed and delivered by the undersigned effective **04/13/2023**.

**FIFTH THIRD BANK, NATIONAL ASSOCIATION, SBM TO
FIFTH THIRD MORTGAGE COMPANY**

Aaron Marcheski

By: _____
Name: **Aaron Marcheski**
Title: **Assistant Vice-President**

STATE OF Ohio } s.s.
COUNTY OF HAMILTON

On **04/13/2023**, before me, **Sally Knox**, Notary Public, personally appeared **Aaron Marcheski, Assistant Vice-President of FIFTH THIRD BANK, NATIONAL ASSOCIATION, SBM TO FIFTH THIRD MORTGAGE COMPANY**, personally known to me (or proved to me the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that she/he/they executed the same in her/his/their authorized capacity(ies), and that by her/his/their signature(s) 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.

Sally Knox

Notary Public: **Sally Knox**
My Commission Expires: **05/18/2026**
Commission #: **2016-RE-570684**



SALLY KNOX
Notary Public, State of Ohio
My Commission Expires
May 18, 2026
COMMISSION: 2016-RE-570684