

# UNOFFICIAL COPY

Ordering Requested By:  
WASHINGTON MUTUAL BANK FA

When Recorded Return To:

WASHINGTON MUTUAL  
PO BOX 45179  
JACKSONVILLE, FL 32232-5179



Doc#: 0608647029 Fee: \$26.50  
Eugene "Gene" Moore RHSP Fee:\$10.00  
Cook County Recorder of Deeds  
Date: 03/27/2006 07:58 AM Pg: 1 of 2

## SATISFACTION

WASHINGTON MUTUAL - CLIENT IFS #:0682613740 "CASTREJON" Lender ID:D12/001/601679203 Cook, Illinois PIF: 02/21/2006

**FOR THE PROTECTION OF THE OWNER, THIS RELEASE SHALL BE FILED WITH THE RECORDER OR THE REGISTRAR OF TITLES IN WHOSE OFFICE THE MORTGAGE OR DEED OF TRUST WAS FILED.**

KNOW ALL MEN BY THESE PRESENTS that WASHINGTON MUTUAL BANK, FA holder of a certain mortgage, made and executed by ALBERTO CASTREJON AND ROSA CASTREJON, HUSBAND AND WIFE, originally to WASHINGTON MUTUAL BANK, FA, A FEDERAL ASSOCIATION, in the County of Cook, and the State of Illinois, Dated: 08/25/2005 Recorded: 09/15/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 0525833113, does hereby acknowledge that it has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said mortgage.

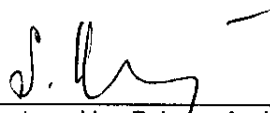
Legal: See Exhibit "A" Attached Hereto And By This Reference Made A Part Hereof

Assessor's/Tax ID No. 13232340290000

Property Address: 3616 N KEDZIE, CHICAGO, IL 60618

IN WITNESS WHEREOF, the undersigned, by the officer duly authorized, has duly executed the foregoing instrument.

WASHINGTON MUTUAL BANK, FA  
On March 6th, 2006

By:   
S Khomutova, Lien Release Assistant  
Secretary

STATE OF Florida  
COUNTY OF Duval

On March 6th, 2006, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared S Khomutova, Lien Release Assistant Secretary, personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

WITNESS my hand and official seal,

  
Notary Expires: / /



**Shannon Macklin**  
Commission # DD428678  
Expires May 11, 2009  
Bonded Troy Pain Insurance, Inc 800-385-7019

(This area for notarial seal)

Prepared By: Deloris Barnes, WASHINGTON MUTUAL BANK, FA, PO BOX 45179, JACKSONVILLE, FL 32232-5179 866-926-8937

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**STREET ADDRESS:** 3616 N. KEDZIE

**CITY:** CHICAGO

**COUNTY:** COOK

**TAX NUMBER:** 13-23-234-029-0000

**LEGAL DESCRIPTION:**

LOT 15 IN THE RESUBDIVISION OF LOTS 1 TO 17 BOTH INCLUSIVE, IN WILLIAM BOLDENWECK'S ADDITION TO UNTERDERLINDEN IN NORTHEAST 1/4 OF SECTION 23, TOWNSHIP 40 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Property of Cook County Clerk's Office