

# UNOFFICIAL COPY

Recording Requested By:  
WASHINGTON MUTUAL BANK, FA



When Recorded Return To:

Doc#: 0611506150 Fee: \$26.50  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 04/25/2006 01:55 PM Pg: 1 of 1

Washington Mutual  
PO BOX 45179  
JACKSONVILLE, FL 32232-5179

### SATISFACTION

WASHINGTON MUTUAL - CLIENT #08 #:0634067763 "SALGANIK" Lender ID:F59/002/1700609653 Cook, Illinois PIF: 04/06/2006

**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 EUGENE A. SALGANIK AND JANE SALGANIK, HUSBAND AND WIFE, originally to AMERICAN UNITED MORTGAGE COMPANY, in the County of Cook, and the State of Illinois, Dated: 10/04/2005 Recorded: 10/17/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 0529041228, 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: LOT 116 AND LOT 117 IN KOSTNER & CHURCH "L" SUBDIVISION 1ST ADDITION OF THE SOUTH 105.66 RODS OF THE EAST 35.52 RODS OF THE NORTHWEST 1/4 OF SECTION 15, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Assessor's/Tax ID No. 10-15-113-011, 10-15-113-012

Property Address: 9400 KENNETH, SKOKIE, IL 60076

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

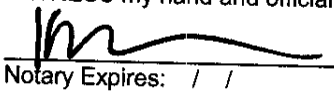
WASHINGTON MUTUAL BANK, FA  
On April 13th, 2006

By:   
J TATE, Lien Release Assistant Secretary

STATE OF Florida  
COUNTY OF Duval

On April 13th, 2006, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared J TATE, 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: / /

 **Kim Mathys**  
Commission # DD401905  
Expires March 1, 2009  
Bonded Troy Pain - Insurance, Inc. 800-388-7019

(This area for notarial seal)

Prepared By: Paulette Anderson, WASHINGTON MUTUAL BANK, FA, PO BOX 45179, JACKSONVILLE, FL 32232-5179 1-866-926-8937

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PI  
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DHC