## UNOFFICIAL COPY

Recording Requested By: Centar FSB

When Recorded Return To: PATRICIA FINUCANE 1716 N LILLIAN LANE ABLINGTON HEIGHTS, IL 60004



Doc#: 0724731014 Fee: \$26.50 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds Date: 09/04/2007 09:45 AM Pg: 1 of 2



## SATISFACTION

Cenlar FSB #:0110204443 "FliNUCANE" Lender ID:Q24/0216533160 Cook, Illinois

FOR THE PROTECTION OF THE OWNER, THIS RELEASE SHALL BE FILED WITH THE RECORDER OR THE REGISTEAR OF TITLES IN WHOSE OFFICE THE MORTGAGE OR DEED OF

KNOW ALL MEN BY THESE PRESENTS that ABN AMRO MORTGAGE GROUP, INC. holder of a certain mortgage, made TRUST WAS FILED. and executed by PATRICIA A FINUCANE AND CHARLES R FINUCANE, WIFE AND HUSBAND, originally to ABN AMRO MORTGAGE GROUP, INC., in the County of Ccok, and the State of Illinois, Dated: 07/21/2006 Recorded: 08/09/2006 as Instrument No.: 0622146040, does hereby acknowledge that it has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and dischaigs said mortgage.

Legal: Lot 9 in Dover Court, being a subdivision of part of the east 1/2 of the east 1/2 of the west 1/2 of the northwest 1/4 of section 21, township 42 north, range 11 east of the third principal meridian, in Cook County Illinois.

Assessor's/Tax ID No. 03211170090000

Property Address: 1716 N LILLIAN LANE, ARLINGTON HEIGHTS, IL 6000

IN WITNESS WHEREOF, the undersigned, by the officer duly authorized, has druy e recuted the foregoing instrument. 

ABN AMROMORTGAGE GROUP, INC.

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SATISFACTION Page 2 of 2 STATE OF COUNTY OF \_\_ a Notary Public in and for , personally appeared MARIANNE Maur before me, WALLNER, First Vice President, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. OFFICIAL SEAL WITNESS my hand and official seal, MAUREEN T SROMEK NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/22/08 (This area for notarial seal)

Prepared By: Susanna C Parker, CENLAR FSB PO BOX 77414, TRENTON, NJ 08628 609-883-3900