## **UNOFFICIAL COPY**

32084779
RELEASE OF MORTGAGE
OR TRUST DEED BY
CORPORATION (ILLINOIS)

FOR THE PROTECTION OF THE OWNER, THIS RELEASE SHALL BE FILED WITH THE RECORDER OF DEEDS OR THE REGISTRAR OF TITLE IN WHOSE OFFICE THE MORTGAGE OF DEED OF

Doc#. 1708939049 Fee: \$50.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 03/30/2017 09:49 AM Pg: 1 of 2

	ABOVE SPACE FOR RECORDER'S USE ONLY		
$\sim$			
KNOW ALL MEN BY TIESE PRESENTS, that	HealthCare Associates Credit Union	of the County of	
DuPage and the State of illinois for and in con	sideration of the payment of the indebtedness se	cured by the Mortgage	
hereinafter mentioned, and no cancellation of	all the notes thereby secured, and of the sum of	one dollar, the receipt	
whereof is hereby acknowledged, Zoes hereby f	REMISE, RELEASE, CONVEY and QUIT CLAIM u	nto:	
MARION D KOTECKI AND KANDY K KO TENANTS	TECKI AKA RANDY KOTECKI, HIS WIFE, AS JO	TNIC	
		<b>5</b> 1157	
may have acquired in, through or by a certain me		THEY BRUARY 2016	
and recorded in the Recorder's Office of	County, in the State of Illinois, as		
	s therein de ວ່າ bed as follows, situated in the Coun	ıy	
of <u>COOK</u> State of Illinois, to w			
PRINCIPAL MERIDIAN, ACCORDING TO THE REGISTRAR OF TITLES OF COOK NO. 281554, IN COOK COUNTY, ILLINO	10/7/s O/	FICE OF LIMENT	
together with all the appurtenances and privilege Permanent Real Estate Index Number(s): 07-1	es thereunto belonging or appertaining. 8-409-030-0000		
Address of premises: 708 BRIAN AVE SCHAL	JMBURG, IL 60194		
Witness hands and seal this 20TH day	y of <b>MARCH</b> , <b>2017</b>		
<del></del>			
	Fan L. Needl		
	Todd J Niedermeier - SENIOR VP/CO	ρ	
	12. 1 2/2	}	

## **UNOFFICIAL COPY**

aforesaid DO HEREBY CERTIFY that Todd J Niedermeier personally known to me to be the	STATE OF ILLINOIS					
aforesaid DO HEREBY CERTIFY that Todd J Misdermeier personally known to me to be the senior versor of HealthCare Associates Credit Union, an Illinois corporation, and Robert Hagglund personally known to me to be the computation and personally known to me to be the same persons whose names are subscribed to foregoing instrument, appeared before me this day in person and severally acknowledged that as such senior versor and computance manager they signed and delivered the said instrument as their free and voluntary act, and as the free and voluntary act of said corporation, for the uses and purposes therein set forth.  GIVEN under my hand and official seal, this	COUNTY OFDUPAG	E	<u> </u>			
OFFICIAL SEAL CHRISTINE OLIVER NOTARY PUBLIC STRING VOLVER NOTARY PUBLIC, STATE OF ILLINORS NY Commission Express 01002019  HEALTHCARE ASSOCIATES CREDIT UNION  1151 E WARRENVILLE RD  MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD  MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD  MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD	CHRISTINE OLIVER		, a notary public in and t	for said County, in the State		
OFFICIAL SEAL CHRISTINE OLIVER NOTARY PUBLIC STRING VOLVER NOTARY PUBLIC, STATE OF ILLINORS NY Commission Express 01002019  HEALTHCARE ASSOCIATES CREDIT UNION  1151 E WARRENVILLE RD  MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD  MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD  MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD	aforesaid DO HEREBY CERTIFY tha	t Todd J Niedermeier per	sonally known to me to be t	he		
persons whose names are subscribed to foregoing instrument, appeared before me this day in person and severally acknowledged that as such senior vercoo and compliance manager they signed and delivered the said instrument as their free and voluntary act, and as the free and voluntary act of said corporation, for the uses and purposes therein set forth.  GIVEN under my hand and official seal, this						
acknowledged that as such senior VPICOO and compliance manager they signed and delivered the said instrument as their free and voluntary act, and as the free and voluntary act of said corporation, for the uses and purposes therein set forth.  GIVEN under my hand and official seal, this	personally known to me to be the con	PLIANCE MANAGER Of Said (	corporation, and personally	known to me to be the same		
said instrument as their free and voluntary act, and as the free and voluntary act of said corporation, for the uses and purposes therein set forth.  GIVEN under my hand and official seal, this	•					
purposes therein set forth.  GIVEN under my hand and official seal, this						
GIVEN under my hand and official seal, this		ntary act, and as the free	e and voluntary act of said	corporation, for the uses and		
My commission expires: 01:06:2019  OFFICIAL SEAL CHRISTINE OLIVER NOTARY PUBLIC. STATE OF ILLINOIS My Commission Expires 01:06:2019  RELEASE DEED By Comporation  HEALTHCARE ASSOCIATES CREDIT UNION 1151 EAST WARREN VILLE ROAD  NAPERVILLE, IL 66:663  TO  MARION KOTECKI RANDY KOTECKI 708 BRIAN AVE SCHAUMBURG, IL 60194  MAIL TO  HEALTHCARE ASSOCIATES CR UNION 1151 E WARRENVILLE RD	purposes therein set forth.					
My commission expires: 01:06:2019  OFFICIAL SEAL CHRISTINE OLIVER NOTARY PUBLIC. STATE OF ILLINOIS My Commission Expires 01:06:2019  RELEASE DEED By Comporation  HEALTHCARE ASSOCIATES CREDIT UNION 1151 EAST WARREN VILLE ROAD  NAPERVILLE, IL 66:663  TO  MARION KOTECKI RANDY KOTECKI 708 BRIAN AVE SCHAUMBURG, IL 60194  MAIL TO  HEALTHCARE ASSOCIATES CR UNION 1151 E WARRENVILLE RD						
OFFICIAL SEAL CHRISTINE OLIVER NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expres 01/06/2019  P.E. LEASE DEED By Comporation  HEALTHCARE ASSOCIATES CREDIT UNION 1151 EAST WARRENVILLE ROAD  NAPERVILLE, IL 60663  TO  MARION KOTECKI RANDY KOTECKI 708 BRIAN AVE SCHAUMBURG, IL 60194  MAIL TO  HEALTHCARE ASSOCIATES CR UNION 1151 E WARRENVILLE RD	GIVEN under my hand and official se	al, this 20TH	_day of <u>MARCH</u>	<u>, 2017                                    </u>		
OFFICIAL SEAL CHRISTINE OLIVER NOTARY PUBLIC STATE OF ILLINOIS My Commission Expires 01/06/2019  RELEASE DEED By Comporation  HEALTHCARE ASSOCIATES CREDIT UNION  1151 EAST WARREN VILLE ROAD  NAPERVILLE, IL 66565  TO  MARION KOTECKI RANDY KOTECKI 708 BRIAN AVE SCHAUMBURG, IL 60194  MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD	My commission expires: 01/06/2019					
OFFICIAL SEAL CHRISTINE OLIVER NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 01/06/2019  REALTHCARE ASSOCIATES CREDIT UNION 1151 EAST WARREN VILLE ROAD NAPERVILLE, IL 60563  TO  MARION KOTECKI RANDY KOTECKI 708 BRIAN AVE SCHAUMBURG, IL 60194  MAIL TO  HEALTHCARE ASSOCIATES CR UNION 1151 E WARRENVILLE RD	9	•	a hope	1/1		
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MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD	708 BRIAN AVE					
MAIL TO  HEALTHCARE ASSOCIATES CR UNION  1151 E WARRENVILLE RD		SCHAUMBU	RG, IL 60194	· (C)		
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