## UNOFFICIAL COPY

Doc#. 2125806316 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 09/15/2021 01:31 PM Pg: 1 of 2

#### PREPARED BY AND AFTER RECORDING MAIL TO:

**UPF WASHINGTON INCORPORATED** 12410 E MIRABEAU PKWY #100 SPOKANE VALLEY, WA 99216 Ref. No. 3540460(P)(E)

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

#### RELEASE OF MORTGAGE

#### KNOW ALL PERSONS BY THESE PRESENTS:

That Partnership Financial CU, the current owner and holder, of a certain Mortgage dated 5/26/2017, and executed by DAVID A THOMASON and TARA A THOMASON, husband and wife as tenants by the entirety, as Mortgagor(s), and Partnership Financial CU as mortgagee, and recorded in the office of the Cook County Recorder, State of Illinois, on 6/5/2017, in Pook n/a, Page n/a, Document No. 1715655041, does hereby release and discharge the lien of said mortgage in Cook County, State of Illinois.

Legal: THE SOUTH 1/2 OF LOT 20 AND ALL OF LOT 21 IN THE SUBDIVISION OF B LOCK 3 IN GUNDERSON AND GAUGHER'S ADDITION TO OAK PARK, A SUPPLY/ISION OF PART OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 18, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, COOK COUNTY, ILLINOIS

PIN: 16-18-318-014-0000

Commonly known as 1138 WENONAH AVE, OAK PARK IL 60304

Office (see next page for signatures and notary acknowledgment)

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# **UNOFFICIAL COPY**

DATED:	9/14/2021	PARTNERSHIP FINANCIAL CU	
Loan #	61909206	BY: Brian Thompson, Vice Pres	ident, Authorized Signor
STATE OF	F WASHINGTON Spokane	for Partnership Financial CL ) )	J
President the basis instrumer capacity( of which with the second of whi	t, Authorized Signor fo of satisfactory evidend it and tick rowledged t ies), and that by his/he	undersigned Notary Public, personally appeared reartnership Financial CU, personally known to be to be the person(s) whose name(s) is/are sure on me that he/she/they executed the same in his er/their signature(s) on the instrument the person secuted the instrument.  seal.	ome (or proved to me on abscribed to the within /her/their authorized
	NUMBER 20112071 ornes August 3, 2024 lly Notarized	NOTARY PUBLIC in and for the r inted Name:	State of WASHINGTON Amanda Kienke
		My som nission expire	8/3/2024
			S OFFICE