

**REQUEST FOR CANCELLATION
BY LICENSED FINANCIAL INSTITUTION
(Pursuant to R.S. 9:5172)**

STATE OF LOUISIANA

PARISH OF JACKSON

BE IT KNOWN that on this _____ day of _____, 20_____, before me the undersigned Notary, duly commissioned and qualified in and for the above named Parish and State, **PERSONALLY CAME AND APPEARED:**

Represented herein by: _____

Title: _____, its duly authorized representative, who after being duly sworn declared that it is a licensed financial institution as defined in R.S. 9:5172 et seq. and that one of the following statements is true and correct:

- () The institution was the obligee or authorized agent of the obligee of the secured obligation described below when the obligation was extinguished, and the secured obligation has been paid or otherwise satisfied or extinguished; or
- () The institution is the obligee or authorized agent of the obligee of the secured obligation, and it releases the mortgage or privilege described below.

The Recorder of Mortgages in and for the Parish of Jackson is hereby requested, authorized, and directed to cancel the recordation of the mortgage or privilege described as follows:

Mortgagor _____

Mortgagee _____

In the sum of _____ Dated _____

Registry Number _____ MOB _____ FOLIO _____

of the official records of Jackson Parish, Louisiana, which affects the following described property:

The undersigned acknowledges that he is liable to and shall indemnify the Recorder of Mortgages of Jackson Parish and any of its employees or agents to relying on this Request for Cancellation for any damages they may suffer as a consequence of such reliance in accordance with provisions of R.S. 9:5174.

SIGNATURE: _____

PRINTED NAME: _____

COMPANY NAME: _____

TITLE: _____

ADDRESS: _____

TELEPHONE NO: _____

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Public

Printed Name: _____

ID or Bar Roll Number: _____

Commission Expires: _____