RELEASE BY OBLIGEE OF RECORD (Pursuant to R.S. 44:106)

STATE OF LOUISIANA PARISH OF ST. MARTIN

BE IT KNOWN that on this day of, 20, before me the unders Notary, duly commissioned and qualified in and for the above named Parish and State,	
PERSONALLY CAME AND APPEARED:	
Represented herein by:	
itle:, i	its duly authorized representative, who after being duly swor
eclared:	
 The above named appearer is the of described mortgage or privilege. The above named appearer is the as described mortgage or privilege. S 	bligee of record of the obligation secured by the below ssignee of record of the obligation secured by the below aid assignment is duly recorded at: MOB FOLIO
	r otherwise satisfied or extinguished and further the said
The Recorder of Mortgages in and for the Paragraph of cancel the recordation of the mortgage or	arish of St. Martin is hereby requested, authorized and direct privilege described as follows:
	Dated
ntry Number	MOB FOLIO
The undersigned collapsylledges that he is lie	shle to and shall indomnify the Decorder of Mortgages of
st. Martin Parish and any of its employees of	able to and shall indemnify the Recorder of Mortgages of or agents relying on this Request for Cancellation for any of such reliance in accordance with provisions of R.S. 44:110
t. Martin Parish and any of its employees of amages they may suffer as a consequence of	or agents relying on this Request for Cancellation for any
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st. Martin Parish and any of its employees of lamages they may suffer as a consequence of	or agents relying on this Request for Cancellation for any of such reliance in accordance with provisions of R.S. 44:110 SIGNATURE: PRINTED NAME:
st. Martin Parish and any of its employees of lamages they may suffer as a consequence of	or agents relying on this Request for Cancellation for any of such reliance in accordance with provisions of R.S. 44:110 SIGNATURE: PRINTED NAME: COMPANY NAME: TITLE: ADDRESS:
t. Martin Parish and any of its employees of amages they may suffer as a consequence of	or agents relying on this Request for Cancellation for any of such reliance in accordance with provisions of R.S. 44:110 SIGNATURE: PRINTED NAME: COMPANY NAME: TITLE:
St. Martin Parish and any of its employees of lamages they may suffer as a consequence of with the state of t	or agents relying on this Request for Cancellation for any of such reliance in accordance with provisions of R.S. 44:110 SIGNATURE: PRINTED NAME: COMPANY NAME: TITLE: ADDRESS:
At. Martin Parish and any of its employees of amages they may suffer as a consequence of a vitnesses: Sworn to and subscribed before me this	SIGNATURE: PRINTED NAME: COMPANY NAME: TITLE: ADDRESS: TELEPHONE NO: