Recording Requested By:
Regions Mortgage, Inc.
When Recorded Return To:
Regions Mortgage, Inc. /PIF
P.O. Box 669
Montgomery, AL 36177-9469

## DISCHARGE OF MORTGAGE

Regions Mortgage, Inc. #:004794418 "Eppotte" Lander ID:004794418/ Shelby, Alabama 01/117: 8 50

KNOW ALL MEN BY THESE PRESENTS,
That REGIONS BANK, BY ITS AUTHORIZED AGENT, REGIONS MORTGAGE, INC., hereinafter
That REGIONS BANK, BY ITS AUTHORIZED AGENT, REGIONS MORTGAGE, INC., hereinafter
That REGIONS BANK, BY ITS AUTHORIZED AGENT, REGIONS MORTGAGE, INC., hereinafter
That REGIONS BANK, BY ITS AUTHORIZED AGENT, REGIONS BY PATRICIA A EPPOLITO
01/24/1997, made and executed by LOUIS J EPPOLITO JOINED BY PATRICIA A EPPOLITO
01/24/1997, made and executed by LOUIS J EPPOLITO JOINED BY PATRICIA A EPPOLITO
HIS WIFE, to secure payment of the principal sum of \$230,000.00 plus interest,
HIS WIFE, to secure payment of the principal sum of \$230,000.00 plus interest,
originally to REGIONS BANK, in the County of SHELBY and the State of ALABAMA,
originally to REGIONS BANK, in the County of SHELBY and the State of ALABAMA,
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originally to REGIONS BANK, in the County of SHELBY and the State of ALABAMA,
originally to REGIONS BANK, and is therefore discharged.

In all references in this instrument to any party, the use of a particular gender or number is intended to include the appropriate gender or number as the case may be.

IN WITNESS WHEREOF, the said Mortgagee has set his hand and has caused these presents to be signed by its duly authorized officer(s).

Regions Bank, by its authorized agent,

Regions Mortgage, Inc.

w A oh

SHERRY M HARRELL, SUPPORT SERVICES MANAGER

STATE OF Alabama COUNTY OF Montgomery

On I, a Notary Public in and for Montgomery County, in the State of Alabama, do hereby certify that Sherry A Harrell, Support Services Manager, who is/are signed to the foregoing document and who is/are known to me, acknowledged before me on this day, that being informed of the contents of said instrument, he/she/they as such officer(s) and with full authority, executed the same voluntarily for and as the act of said corporation, on the day the same bears date.

WITNESS my hand and official seal,

My Commission Expires 8-85-600

(This area for no

\* Document Prepared By:
Amber Reaker, 806 S. Perry St. Montgomery, Al. 36104 800-828-378-

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