

REQUEST FOR CANCELLATION

In accordance with the provisions of La. C.C. Article 3366, The Recorder of Mortgages for Jackson Parish, Louisiana is hereby requested and directed to cancel the recordation of the following described privilege:

- () **MORTGAGE** granted by _____
 In favor of _____
 In the sum of _____ Dated _____
 Registry Number _____ MOB _____ FOLIO _____
- () **JUDGMENT** granted by _____
 In favor of _____
 In the sum of _____ Dated _____
 Registry Number _____ MOB _____ FOLIO _____
- () **OTHER** _____

 Registry Number _____ MOB _____ FOLIO _____

THIS REQUEST TO CANCEL IS BASED ON THE FOLLOWING:
(Please initial/check the appropriate box)

- () R.S. 44:106 **No Paraphed Obligation** – Authentic Act signed by Obligee of Record that acknowledges satisfaction
- () R.S. 44:107 **Paraphed Obligation** – Note Attached marked “Paid” or “Cancelled”
- () R.S. 44:107 **Paraphed Obligation** – An authentic act of release executed by the holder/owner of the note before a notary who certifies that he paraphed it for identification with the act of release.
- () R.S. 44:108 **Public Officer** – (Sheriff, Marshal or other officer as a consequence of a judicial sale or other decree of action)
- () R.S. 44:111B **Bankruptcy Order of Discharge** – Order to Cancel
- () R.S. 44:111C **Bankruptcy Order of Discharge** – Affidavit
- () CC 3367 **Prescribed Mortgage or Privilege** – Request for Cancellation
- () CC 3368 **Prescribed Judicial Mortgage** – Certificate of Clerk of the Court rendering Judgment – that no suit or motion has been filed for revival or certified copy of final judgment rejecting the demand to revive judgment
- () R.S. 9:5167E **Affidavit of Lost Note** – After Receipt of Notary who satisfied note out of proceeds
- () R.S. 9:5167.1 **Affidavit to Cancel** by Title Insurance Officer
- () _____ **OTHER** _____

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. 44:110.

This _____ day of _____, 20_____.

SIGNATURE: _____
PRINTED NAME: _____
COMPANY NAME: _____
TITLE: _____
ADDRESS: _____
TELEPHONE NO: _____