AFFIDAVIT OF LOST PARAPHED PROMISSORY NOTE OR RELEASE INSTRUMENT & REQUEST FOR CANCELLATION OF MORTGAGE OR PRIVILEGE AND RELEASE (BY LICENSED TITLE INSURANCE COMPANY) (Pursuant to La. R.S. 9:5167(B))

Parish/County of:	, State of		
BE IT KNOWN THAT on this	-		-
Notary Public, appeared:			·
company), affiant, a licensed title insurar	nce company as def	fined in the Louisiana	Insurance Code (<i>this DOES</i>
NOT include title agents), herein represe	nted by its undersi	gned duly authorized	l officer, which declared that:
All obligations secured by the mo the above named title insurance company property which had secured a debt with	y has issued or will	issue a policy of title	insurance covering the same
The affiant has made a due and or release instrument, the note or instrument satisfaction of the secured obligation.			
The description of the lost note o	r instrument is as f	ollows:	
Lost paraphed promissory	note:		
Dated:		; In the amount of	f: \$
Granted by:			;
In favor of:			;
Executed before			, Notary Public;
OR			
Lost release instrument execu	ıted by:		·
expressly requested, authorized, and direct follows: A mortgage or privilege: Granted by:			
In favor of:			;
Date of instrument:	; Parish	of Recordation:	;
Recording data: MOB f	olio, Instru	iment No.:	
Legal description is hereby attacl	hed as Exhibit "A".		
***Attach property description for p	artial release ONL	Y. If no property des	cription is provided, this
document is intended	as a FULL release	of the aforesaid inscr	iption.***
If you wish to cancel related subseque	ent inscriptions, lis	st them on a request t	o cancel form and attach.
The above title insurance compa mortgages and any person relying upon t consequence of such reliance if this affic recorder to incorrectly cancel the recorda	the cancellation by a lavit contains mate	affidavit for any dame erially false or incorr	ages that they may suffer as a
	Sig	gnature:	
Name of Title Insurance (Company Officer a	nd Title:	
Name of T	Title Insurance Con	npany:	
N	Iailing Address: _		
City: _		State:	ZIP:
Notary Public			
Printed Name:			

Notary or Bar Number : _____ Commission expires: ___