

To: Hon. Mike Spence
Caddo Parish Clerk of Court
and ex-officio Recorder of Mortgages

REQUEST FOR CANCELLATION

Pursuant to La. C.C. Article 3366, the Recorder of Mortgages for Caddo 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 _____ Page _____
- () **JUDGMENT** in favor of _____
Against _____
In the sum of _____ Dated _____
Registry Number _____ MOB _____ Page _____
- () **OTHER** _____

Registry Number _____ MOB _____ Page _____

THIS REQUEST TO CANCEL IS BASED ON THE FOLLOWING:

(Please initial the appropriate box)

- () R.S. 9:5169 **No Paraphed Obligation** – Authentic Act signed by Obligee of Record that acknowledges satisfaction
- () R.S. 9:5170 **Paraphed Obligation** – Note Attached marked “Paid” or “Cancelled”
- () R.S. 9:5170 **Paraphed Obligation** – An Act of release executed before a notary who certifies in the act that the obligation was presented to him by the holder and owner and that (s)he paraphed it for identification with the act of release
- () R.S. 9:5171 **Public Officer** (Sheriff, Marshal or other officer as a consequence of a judicial sale or other decree or action)
- () R.S. 9:5175 **Bankruptcy Order of Discharge** – Affidavit
- () CC 3367 **Prescribed Mortgage or Privilege** – Application
- () 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 for revival
- () 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
- () R.S. 9:5168 **Affidavit of Lost or Destroyed Note**
- () **OTHER** _____

The undersigned acknowledges that (s)he is liable to and shall indemnify the Recorder of Mortgages of Caddo Parish and his employees or agents relying on this Request for Cancellation for any damages suffered as a consequence of such reliance pursuant to R.S. 9:5174.

This _____ day of _____, 20_____.

SIGNATURE: _____

PRINTED NAME: _____

COMPANY NAME: _____

TITLE: _____

ADDRESS: _____

TELEPHONE NO.: _____