✓ Book 2009 Page 1745
Document 2009 1745 Type 06 010 Pages 3
Date 4/30/2009 Time 1:15:35PM
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DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

Individual Trustee's Affidavit

THE IOWA STATE BAR ASSOCIATION
Official Form No. 113
Recorder's Cover Sheet

Preparer Information: (Name, address and phone number)
Michael A. Bowman, 114 S. Cedar St., Monticello, IA 52310, Phone: (319) 465-5448

Taxpayer Information: (Name and complete address)
Arlyn D. Maifeld, 2046 200th Ave., Manchester, IA 52057

Return Document To: (Name and complete address)
Michael A. Bowman, 114 S. Cedar St., Monticello, IA 52310, Phone: (319) 465-5448

Grantors:
Wayne A. Brunkan
Dorothy A. Brunkan

Grantees:
~~XXXXXXXXXXXXXX~~
WAYNE A. BRUNKAN, TRUSTEE
DOROTHY A. BRUNKAN, TRUSTEE

Legal description: See Page 2

Document or instrument number of previously recorded documents:

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THE IOWA STATE BAR ASSOCIATION Official Form No. 113	Michael A. Bowman	FOR THE LEGAL EFFECT OF THE USE OF THIS FORM, CONSULT YOUR LAWYER

INDIVIDUAL TRUSTEE'S AFFIDAVIT

RE:
The Southwest Quarter (SW1/4) of the Southwest Quarter (SW1/4) of Section Twenty Six (26), Township Eighty Nine (89) North, Range Five (5), West of the Fifth P. M.

State of Iowa County of Delaware ss:

I, Wayne A. Brunkan and Dorothy A. Brunkan, being first duly sworn (or affirmed) under oath, state of my personal knowledge that:

1. I am the trustee under the Trust dated September 9, 1990, to which the above-described real estate was conveyed to the trustee by Aloysius Otting, pursuant to an instrument recorded the 8th day of MAY, 1997, in the office of the Delaware County Recorder in Book 138, Page 71 (insert recording data).

2. I am the presently existing trustee under the Trust and I am authorized to convey real estate

(describe the transfer to be made by the trustee to the bona fide purchaser), without any limitation or qualification whatsoever.

3. The Trust is in existence and I, as trustee, am authorized to transfer the interest in the real estate as described in paragraph 2, free and clear of any adverse claims.

4. The grantor of the trust is alive.

5. The trust is revocable or, if the trust is irrevocable, none of the beneficiaries of the trust are deceased.

Wayne A. Brunkan Dorothy A. Brunkan
Wayne A. Brunkan and Dorothy A. Brunkan Affiant

Signed and sworn to (or affirmed) before me on 3/16/09, by Wayne A. Brunkan and Dorothy A. Brunkan.

SHIRLEY RHOADS
COMM. # 1793398
NOTARY PUBLIC-CALIFORNIA
VENTURA COUNTY
My Commission Expires APRIL 7, 2012

Shirley Rhoads, Notary Public

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ACKNOWLEDGMENT

State of California
County of Ventura)

On 3/16/09 before me, Shirley Rhoads
(insert name and title of the officer)

personally appeared Wayne A Brunkan and Dorothy A. Brunkan
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

SHIRLEY RHOADS
COMM. # 1793398
NOTARY PUBLIC-CALIFORNIA
VENTURA COUNTY
My Commission Expires
APRIL 7, 2012

Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNER

- ☐ INDIVIDUAL
- ☐ CORPORATE OFFICER

_____
TITLE(S)

- ☐ PARTNER(S) ☐ LIMITED ☐ GENERAL
- ☐ ATTORNEY-IN-FACT
- ☐ TRUSTEE(S)
- ☐ GUARDIAN/CONSERVATOR
- ☐ OTHER: _____

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

DESCRIPTION OF ATTACHED DOCUMENT

_____
TITLE OR TYPE OF DOCUMENT

_____
NUMBER OF PAGES

_____
DATE OF DOCUMENT

_____
SIGNER(S) OTHER THAN NAMED ABOVE