

BK: 2019 PG: 3657
Recorded: 11/15/2019 at 3:53:40.0 PM
Pages 3
County Recording Fee: \$22.00
Iowa E-Filing Fee: \$3.00
Combined Fee: \$25.00
Revenue Tax: \$1,600.80
LISA SMITH RECORDER
Madison County, Iowa

CONSIDERATION \$1,001,000



TRUSTEE WARRANTY DEED
THE IOWA STATE BAR ASSOCIATION
Official Form No. 107
Recorder's Cover Sheet

Preparer Information: (Name, address and phone number)

Samuel H. Braland, 115 E. First Street, P.O. Box 370, Earlham, Iowa 50072 (515) 758-2267

Taxpayer Information: (Name and complete address)

Kading, Inc.
1491 Jordan Avenue
Casey, Iowa 50048

Return Document To: (Name and complete address)

Samuel H. Braland
P.O. Box 370
Earlham, Iowa 50072

Grantors:

Ray M. Lenocker Trust

Grantees:

Kading, Inc.

Legal description: See Page 2

Document or instrument number of previously recorded documents:



TRUSTEE WARRANTY DEED
(INTER-VIVOS TRUST)

For the consideration of \$1,001,000.00 and no/100ths----- Dollar(s) and
other valuable consideration, Susan R. Clark
(Trustee) (Co-Trustee)
of the RAY M. LENOCKER TRUST dated July 6, 2014
does hereby convey to KADING, INC.
the following described
real estate in Madison County, Iowa:

The Northeast Quarter (1/4), the North Half (1/2) of the Northwest Quarter (1/4), and the North One-Fourth
(1/4) of the South Half (1/2) of the Northwest Quarter (1/4), ALL in Section Eight (8), Township
Seventy-six (76) North, Range Twenty-nine (29) West of the 5th P.M., Madison County, Iowa.

The grantor hereby covenants with grantees, and successors in interest, that grantor holds the
real estate by title in fee simple; that grantor has good and lawful authority to sell and convey the real
estate; that the real estate is free and clear of all liens and encumbrances, except as may be above
stated; and grantor covenants to warrant and defend the real estate against the lawful claims of all
persons, except as may be above stated.

The grantor further warrants to the grantees all of the following: That the trust pursuant to
which the transfer is made is duly executed and in existence; that to the knowledge of the grantor the
person creating the trust was under no disability or infirmity at the time the trust was created; that the
transfer by the trustee to the grantees is effective and rightful; and that the trustee knows of no facts or
legal claims which might impair the validity of the trust or the validity of the transfer.

Words and phrases herein, including the acknowledgment hereof, shall be construed as in the
singular or plural number, according to the context.

Dated November 12, 2019 .

Susan R. Clark
Susan R. Clark
As (Trustee) (Co-Trustee) of
the above-entitled trust

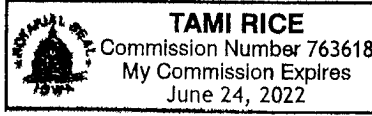
As (Trustee) (Co-Trustee) of
the above-entitled trust

Acknowledgment for Individual Trustee

STATE OF IOWA, COUNTY OF MADISON

This record was acknowledged before me on November 13, 2019, by Susan R. Clark

As (Trustee) ~~(Co-Trustee)~~ of the above entitled trust.



Tami Rice
Signature of Notary Public

STATE OF _____, COUNTY OF _____

This record was acknowledged before me on _____, by _____

As ~~(Trustee)~~ (Co-Trustee) of the above entitled trust.

Signature of Notary Public

Acknowledgment for Corporate Trustee

STATE OF _____, COUNTY OF _____

This record was acknowledged before me on _____, by _____

as _____,
of _____

As (Trustee) (Co-Trustee) of the above entitled trust.

Signature of Notary Public

STATE OF _____, COUNTY OF _____

This record was acknowledged before me on _____, by _____

as _____,
of _____

As (Trustee) (Co-Trustee) of the above entitled trust.

Signature of Notary Public