## Document 2009 2567

Book 2009 Page 2567 Type 05 003 Pages 1 Date 8/13/2009 Time 10:26 AM Rec Amt \$9.00 IND

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

## Prepared By: Kristi Doherty, WELLS FARGO HOME MORTGAGE 2701 WELLS FARGO WAY, X9901-L1R, MINNEAPOLIS, MN 55467 800-288-3212

Return By Mail To:

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WELLS FARGO HOME MORTGAGE MAC X9901-L1R Po Box (629 2701 WELLS FARGO WAY MINNEAPOLIS, MN 55467

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## SATISFACTION OF MORTGAGE

WFHM - CLIENT 708 #:0260130646 "BAKER" Lender ID:F04201/0260130646 Madison, Iowa KNOW ALL MEN BY THESE PRESENTS that Wells Fargo Bank, N.A. whose address is 2701 WELLS FARGO WAY, X9901-L1R, MINNEAPOLIS, MN 55467 holder of a certain Mortgage, whose parties, dates and recording information are below, does hereby acknowledge that it has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said Mortgage.

Original Grantor: ROB BAKER AND KAROLYN BAKER HUSBAND AND WIFE Original Grantee: WELLS FARGO BANK, N.A. Dated: 07/18/2008 Recorded: 08/01/2008 in Book/Reel/Liber: 2008 Page/Folio: 2399 as Instrument No.: N/A in the records of the County Recorder of Madison State of Iowa

Property Address: 3251 VALLEYVIEW TRAIL, PROLE, IA 50229

IN WITNESS WHEREOF, the undersigned, by the officer duly authorized, has duly executed as a free act and deed the foregoing instrument.

Wells Fargo Bank, N.A. On <u>August 6th, 2009</u>

By:\_\_\_\_\_\_ Dean Hamilton, Vice President Loan Documentation

STATE OF Minnesota COUNTY OF Hennepin

On August 6th, 2009, before me, a Notary Public in and for Hennepin County in the State of Minnesota, personally appeared Dean Hamilton, Vice President Loan Documentation, personally known to me (or 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, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal,

Notary Expires: 1 nonumber



(This area for notarial seal)

\*KJD\*KJD\*08/06/2009 01:41:45 PM\* WFMC04WFMM000000000000000000001381900\* IAMADIS\* 0260130646 IASTATE\_MORT\_REL \*\*KJD\*