

Document 2007 4565

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Date 12/28/2007 Time 11:25 AM  
Rec Amt \$12.00

INDX ✓  
ANNO  
SCAN  
CHEK

LISA SMITH, COUNTY RECORDER  
MADISON IOWA

This Instrument Prepared By:  
DIANE CREAMER

After Recording Return To:

✓ CSMC INC., DBA CENTRAL STATES MORTGAGE  
10425 W. NORTH AVE. #100  
WAUWATOSA, WISCONSIN 53226  
Loan Number: 2161537

Address Tax Statement To:

CSMC INC., DBA CENTRAL STATES MORTGAGE  
10425 W. NORTH AVE. #100  
WAUWATOSA, WISCONSIN 53226

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## Assignment of Mortgage

FOR VALUE RECEIVED, the undersigned hereby grants, assigns and transfers to NATIONWIDE  
ADVANTAGE MORTGAGE COMPANY

all beneficial interest under that certain Mortgage dated DECEMBER 19, 2007 executed by  
CHAD MICHAEL OLSON AND NANCY RAE OLSON, HUSBAND AND WIFE AND  
PAUL OLSON AND CLAUDIA OLSON, HUSBAND AND WIFE, Mortgagor  
and recorded as Instrument No. \_\_\_\_\_ concurrently herewith on 12-28-2007  
in book 2007, page 4564, of Official Records in the County Recorder's office of  
MADISON County, IOWA

describing land therein as

LOT 6 NORTHEAST SECTION ORIGINAL TOWN OF ST. CHARLES, MADISON  
COUNTY, WISCONSIN. THIS IS HOMESTEAD PROPERTY FOR CHAD AND  
NANCY. THIS IS NON-HOMESTEAD PROPERTY FOR PAUL AND CLAUDIA. THIS  
IS A REFINANCE TRANSACTION.

A.P.N.: 870000100050000

Commonly known as: 105 E MAIN STREET, SAINT CHARLES, IOWA 50240

Assessor's Parcel #: 870000100050000

TOGETHER with the note or notes therein described or referred to, the money due and to become due thereon with interest, and all rights accrued or to accrue under said Mortgage. The original principal amount due under this note(s) is \$ 128,967.00

CSMC INC., DBA CENTRAL STATES MORTGAGE

By: \_\_\_\_\_

By: Wendy L Butch

Name: \_\_\_\_\_

Name: WENDY L BUTCH

Title: \_\_\_\_\_

Title: AVP

Attest

Attest

STATE OF ~~IOWA~~ WISCONSIN

COUNTY OF ~~MADISON~~ MILWAUKEE SS.

On December 19, 2007 before me,

Diane L. Creamer personally appeared

Wendy L. Butch, AVP

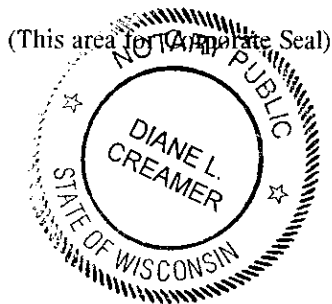
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the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

Signature [Signature]

Diane L. Creamer

Name (Typed or Printed) Diane L. Creamer  
Notary Public in for said State WISCONSIN

(This area for separate Seal)



(This area for official notarial seal)