

Document 2009 954

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Rec Amt \$22.00 Aud Amt \$5.00

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LISA SMITH, COUNTY RECORDER
MADISON IOWA



COURT OFFICER DEED

THE IOWA STATE BAR ASSOCIATION

Official Form No. P201

Recorder's Cover Sheet

Preparer Information: (Name, address and phone number)

Jerrold B. Oliver, P.O. Box 230, Winterset, IA 50273, Phone: (515) 462-3731

Taxpayer Information: (Name and complete address)

Federal National Mortgage Association, 13455 Noel Rd., Galleria Tower Two, Ste. 950,
Dallas, TX 75240

✓ **Return Document To:** (Name and complete address)

Jerrold B. Oliver, P.O. Box 230, Winterset, IA 50273, Phone: (515) 462-3731

Grantors:

THE ESTATE OF
RANDY D. ALAN, Deceased.
Sondra Gray
Duane Miller

Grantees:

Federal National Mortgage Association

Legal description: See Page 2

Document or instrument number of previously recorded documents:



COURT OFFICER DEED

THE ESTATE OF _____

RANDY D. ALAN, Deceased.

now pending in the Iowa District Court

in and for MADISON County. PROBATE No. ESPRO12200

Pursuant to the authority and power vested in the undersigned, and in consideration of ONE Dollar(s) and other valuable consideration, the undersigned, in the representative capacity designated below, hereby Convey(s) to Federal National Mortgage Association

the following described real estate in Madison County, Iowa:
Lot Four (4) of Nelson Acres, Plat 1 in the Southeast Quarter (1/4) of the Northwest Quarter (1/4) in Section One (1), Township Seventy-five (75) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa

This deed is exempt from the Iowa Transfer Tax pursuant to Iowa Code Section 428A.2 subparagraph 18 as a deed in lieu of foreclosure.

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

Dated: 2/24/09

By _____ Title Sondra Gray
By _____ Title Duane Miller

As _____ *in the As Administrator *in the
above entitled estate or cause. above entitled estate or cause.

*Executor, Administrator, Guardian, Conservator, Trustee, Referee, Commissioner, or Receiver

Acknowledgment for Individuals

STATE OF CALIFORNIA, COUNTY OF _____

This instrument was acknowledged before me on _____, by Sondra Gray

as Administrator
of Randy D. Alan Estate

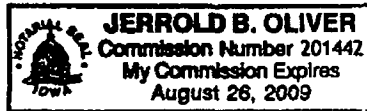
See attached
_____, Notary Public

STATE OF IOWA, COUNTY OF MADISON

This instrument was acknowledged before me on Feb 23, 2009, by Duane Miller

as Administrator
of Randy D. Alan Estate

[Signature]
_____, Notary Public



Acknowledgment for Corporation

STATE OF _____, COUNTY OF _____

This instrument was acknowledged before me on _____, by _____

as _____
of _____
on behalf of said corporation as fiduciary.

_____, Notary Public

STATE OF _____, COUNTY OF _____

This instrument was acknowledged before me on _____, by _____

as _____
of _____
on behalf of said corporation as fiduciary.

_____, Notary Public

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of San Francisco

On 2/24/09

before me,

Andrea Sayago

Here Insert Name and Title of the Officer

personally appeared

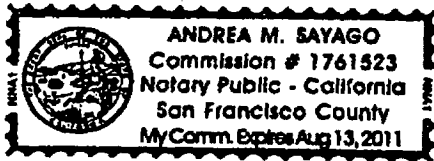
Sandra Gray

Name(s) of Signer(s)

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.



Place Notary Seal Above

Signature

Signature of Notary Public

OPTIONAL

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

Description of Attached Document

Title or Type of Document:

Court Officer Used

Document Date:

2/24/09

Number of Pages:

2

Signer(s) Other Than Named Above:

Diane Miller

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- Individual
- Corporate Officer — Title(s): _____
- Partner — Limited General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: _____

RIGHT THUMBPRINT OF SIGNER
Top of thumb here

Signer is Representing: _____

Signer's Name: _____

- Individual
- Corporate Officer — Title(s): _____
- Partner — Limited General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: _____

RIGHT THUMBPRINT OF SIGNER
Top of thumb here

Signer is Representing: _____