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STATE OF IOWA MADISON COUNTY

USDA-FmHA Form FmHA 460-1 (Rev. 7-11-83) Position 1 (Chattels)
Position 5 (Real Estate)
PARTIAL RELEASE

		andM	ARY L WILD	<u>EN</u>		o
2427 QUAIL RIDGE A	VE. ST. CHARLE	S.IA County of	MADISON			, State o
(Post-office address,			. DECODIN	7D		·
TOWA		, filed or recorded in	the RECORD			office o
MADISC	N	County, State of_				o wit:
Lien Instrument	Mortgagee	Date of Instrument	Date Filed		ument, File Book No.	Page No.
REMORTGAGE	USDA	OCT 25,1985	OCTOBER 3	31,1985	144	314
REMORTGAGE	USDA		JUNE 27,	1994	173	. 60
value received does rel		f said instrument(s) th				
nce North 27°51' th 43°53'29" Wes	st, 109.05 feet	; thence departi	ng said Cre	eek cente	cline, North	
						nning. Sa
						nning. Sa
						nning. Sa
Only the above-descriptions secured by discharged. IN WITNESS WHERE	tains 4.214 Acresided property is release those lien instrument	es including 0.1 ed from the lien of the (s), and these obligation es of America has signe	18 Acres of	ment(s). This is in force and	Road Right o	nning. Sa f Way, ffect or modify
Only the above-descriptions secured by discharged. IN WITNESS WHERE	tains 4.214 Acres the property is release those lien instrument EOF, the United State	ed from the lien of the (s), and these obligationes of America has signed. By _k	aforesaid instrumns shall continued this form on UNITAL	ment(s). This is in force and the/_	release shall not a deffect until fully	nning. Sa f Way, ffect or modif
Only the above-descriptions secured by discharged. IN WITNESS WHERI	tains 4.214 Acres the property is release those lien instrument EOF, the United State	ed from the lien of the (s), and these obligationes of America has signed. By _k	aforesaid instruments shall continued this form on UNITAL LACTING AG (FX)	ment(s). This is in force and the/_ TED STATES MES CREDIT MANAGEMENT	release shall not a deffect until fully	nning. Sa f Way, ffect or modify paid, satisfied

STATE OF Towa	,		•
county of Madison	e p	ACKNOWLEDGMENT	
On this day o	or Soliary	, 19 <u>97</u> , before me,	, the subscriber, a
(Title of officer)	, <u>, , , , , , , , , , , , , , , , , , </u>	, in and for the above county and	d State, appeared
Farmers-Home-Administration, United States Department	, known to me to be artment of Agriculture, a	and the person who executed the fore	going instrument,
and he/she acknowledged to me that he/she execuuses and purposes therein mentioned.			f America, for the
IN WITNESS WHEREOF, I have hereunto set	my hand and seal at	wordsot, 417	
<u> </u>	the da	y and year aforesaid.	`
JANE A. DAWSON MY COMMISSION EXPIRE	ES	ans a Dawso	(Signature)
My commission expires		-	
(To be filled in if certifying officer is a notary	y public)		(Title)