MADISON COUNTY FSA OFFICE BOOK 184 PAGE 819 815 E HWY 92 WINTERSET IA 50273-9501 COMPUTER 96 OCT 11 PM 2: 12 RECORDED. COMPARED MICHELLE UTSLER RECORDER MADISON COUNTY.10WA REC \$ 30 00 Position 1 (Chattels) Position 5 (Real Estate) USDA-FmHA AUD SL RMF. \$ 300 Form FmHA 460-1 PARTIAL RELEASE (Rev. 7-11-83) The United States of America, as owner and holder of the following-described lien instrument(s), made and executed by Janice A. Wildin Jack E. Wildin 3027 155th St., Van Meter, IA 50261, County of Madison (Post-office address, include ZIP Code) Recorder's Iowa office of , filed or recorded in the_ Iowa Madison County, State of. Page No. Date Filed Document, File or Book No. Date of Instrument Lien Instrument Mortgagee 7/12/85 10/25/85 7/12/85 431 143 FmHA RE Mortgage 10/28/85 262 FmHA 144 RE Mortgage 1/3/91 1/4/91 158 59 FmHA RE Mortgage for value received does release from the lien of said instrument(s) the following-described property (describe property in detail): The Northeast Quarter ($\frac{1}{4}$) of the Northeast Quarter ($\frac{1}{4}$) of Section Twenty-three (23), in Township Seventy-four (74) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, "Wherever "Farmers Home Administration", "FmHA", "Baral Dovelopment Administration" or "RDA" may cap. form "United States of Amorfog" is a....

Only the above-described property is released from the lien of the aforesaid instrument(s). This release shall not affect or modify the obligations secured by those lien instrument(s), and these obligations shall continue in force and effect until fully paid, satisfied, and discharged.

IN WITNESS WHEREOF, the United States of America has signed this form on the 10th

day of October 1996.

UNITED STATES OF AMERICA

WITNESSES:

Title Mark T. Matlage, Ag. Credit Manager

Rannexx Moone Action Representation X

United States Department of Agriculture

FmHA 460-1 (Rev. 7-11-83)

1024

STATE OFIOWA	—— <u> </u>		
COUNTY OF MADISON	} ss:	ACKNOWLEDGMENT	
On this 10th	day ofOctober	, 19 <u>96</u> , before me, th	e subscriber, a
Notary Public		, in and for the above county and S	state, appeared
(Title of office	er)	,,	,
Mark T. Matlage	, known to me to be_	Ag. Credit Manager, FSA and the person who executed the foregoin	,
uses and purposes therein mentioned. IN WITNESS WHEREOF, I have the	angeo.	e act and deed of the United States of A Winterset, IA	
	the da	y and year aforesaid.	
[SEAL] MY COMMI	SSION EXPIRES lary 7, 1998	Sexten 1 Lawer	
My commission expires $2-7-98$		Votario Public	(Signature)
(To be filled in if certifying office	cer le a notary public)		(Title)