

Book 2012 Page 2678 Type 06 008 Pages 6 Date 9/11/2012 Time 2:16 PM

Rec Amt \$32.00

INDX-**ANNO SCAN**

CHEK

MADISON COUNTY IOWA

LISA SMITH, COUNTY RECORDER

Recorder's Cover Sheet for Manufactured Home Limited Power of Attorney

Preparer Information: Laura Weber, US Bank Home Mortgage, 809 S 60th St. Suite 210, West Allis, WI 53214 #319-368-4690

Taxpayer Information: Richard A Popp, 2599 Clark Tower Rd, Winterset, IA 50273

Return Document to: Laura Weber, US Bank Home Mortgage, 809 S 60th St. Suite 210, West Allis, WI 53214 #319-368-4690

Legal Description:

Parcel "D" located in the Southwest Quarter (1/4) of the Southwest Quarter (1/4) of Section Nineteen (19), Township Seventy-five (75) North, Range Twenty-seven (27) West of the 5th P.M., and in the Southeast Quarter (1/4) of the Southeast Quarter (1/4) of Section Twentyfour (24), Township Seventy-five (75) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, lowa, as shown in Plat of Survey filed in Book 3, Page 64, on July 14. 1997, in the Office of the Recorder of Madison County, lowa.

Preparedby/ Return To:

Return To: U.S. BANK HOME MORTGAGE 809 S. 60th Street, Suite 210 West Allis, WI 53214

Attn: Laura Weber

SEPTEMBER 7			_2012	
Date				
Place	of Recording	ng	-	
Tax F	Parcel No. <u>5</u>	<u> 2010966023000 & 56</u>	01124880070000	
Legal	Description	is at page		
Lot	Block	Plat or Section	_	
Town	chin Ra	nge Quarter/Quart	er Section	

Manufactured Home Limited Power of Attorney

U.S.	BANK LOAN NUMBER: 2200301111

KNOW ALL PERSONS BY THESE PRESENTS, that

I(We), RICHARD A POPP AND MARIANNE POPP (BUYERS) AND GENE E PAGE, JR AND JULIE A PAGE (SELLERS)

the undersigned, of the County of <u>MADISON</u>, State / Commonwealth of <u>IA</u>, being the Buyer, Seller, or Owner, as applicable, of the following described "**Vehicle**":

USED	1998	FUQUA MFG	562B
New/Used	Year	Manufacturer's Name	Model Name or Model No.
FH469953	X95		
Vehicle Iden	tification Number(s)		
PFS 37532	7 AND PFS 37532	6	
HUD Numbe	ers		

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I(We) do hereby make, constitute, and appoint U.S. Bank National Association ND, U.S. Bank National Association, and any of its agents or designees (each an "Attorney-In-Fact") as my(our) true and lawful attorney-in-fact for the limited purpose of preparing, completing, and executing any and all documents, and taking any and all actions necessary or beneficial in connection with the registration, transfer of ownership, re-titling, and the placement and release of a lien of and for the Vehicle.

Specifically, my(our) Attomey-In-Fact is authorized to, without limitation and as applicable to the situation: (i) prepare and execute required affidavits with respect to the representations made herein; (ii) complete and execute any Certificate of Ownership issued by the Department of Transportation, Motor Vehicle Division, or equivalent state or local agency in and for the State/Commonwealth of IA (each a "State Agency"); (iii) apply for a Certificate of Title issued by the State Agency; (iv) transfer ownership of the Vehicle by completing and executing the necessary provisions of the Certificate of Title, including without limitation, signing the mileage disclosure on the Certificate of Title for the Vehicle, only if the disclosure is made as required by federal and/or state law; and (v) completing and executing any documentation necessary for Attorney-In-Fact to place its lien on the Certificate of Title and to release other existing liens encumbering the Certificate of Title. I(We) further grant and give Attorney-In-Fact the full authority and power to do and perform any and all acts necessary or incident to the execution of the powers expressly granted in this instrument.

The recipient of an original or copy-(photocopy, facsimile, or otherwise) of this instrument may rely on the provisions contained herein without further inquiry into its authenticity or validity, or confirmation of same from me(us), and will not be held liable by me(us) for their reliance on the same.

See E Poge h	Julie a. Lage
Seller Signature	Seller Signature
GENE E PAGE, JR	JULIE A PAGE
Printed Name	Printed Name
Buyer Signature	Buyer Signature
RICHARD A POPP	MARIANNE POPP
Printed Name	Printed Name

Page 2 of 3 Revised 10/25/2011 I(We) do hereby make, constitute, and appoint U.S. Bank National Association ND, U.S. Bank National Association, and any of its agents or designees (each an "Attorney-in-Fact") as my(our) true and lawful attorney-in-fact for the limited purpose of preparing, completing, and executing any and all documents, and taking any and all actions necessary or beneficial in connection with the registration, transfer of ownership, re-titling, and the placement and release of a lien of and for the Vehicle.

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The recipient of an original or copy (photocopy, facsimile, or otherwise) of this instrument may rely on the provisions contained herein without further inquiry into its authenticity or validity, or confirmation of same from me(us), and will not be held liable by me(us) for their reliance on the same.

Seller Signature

GENE E PAGE, JR

Printed Name

Printed Name

Printed Name

Buyer Signature

RICHARD A POPP

Printed Name

Printed Name

MARIANNE POPP

Printed Name

Λ Δ	
STATE OF PH	
COUNTY OF BUCKS	
On the day of Sept in the year undersigned, a Notary Public in and for said State, personally known to me or proved to me on the basis of	_
individual(s) whose name(s) is(are) subscribed to the wit that he/she/they executed the same in his/her/their capacisignature(s) on the instrument, the individual(s), or the peacted, executed the instrument.	hin instrument and acknowledged to me city(ies), and that by his/her/their
Lachara Ethici	
Notary Signature	Official Seal:
Barbara Z. Wise Notary Printed Name	COMMONWEALTH OF PENNSYLVANIA "NOTARIAL SEAL" BARBARA E. WISE, Notary Public Perkasie Boro, County of Bucks, PA My Commission Expires September 10, 2013
Notary Public; State of 1 1 0	my common and
Qualified in the County of Surfs	
My Commission Expires:	
"I affirm, under the penalties for perjury, that I have taker Security number in this document, unless required by lav	reasonable care to redact each Social
State of Iowa County of	Polk

On the 7th day of September 2012 before me, the undersigned, a Notary Public in and for said State, personally appeared Marianne Popp. Personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and scknowledged to me that she executed the same in her capacity and that by her signature on the instrument, the individual, or the person on behalf of which the individual acted, executed the instrument.

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Notary Signature	
Rhonda L. Kimble / RHONDA L. KIMB'	<u></u>
Notary Public; State of Iowa Qualified in the County of Polk Commission Number 761 My Commission Explication September 13, 2013	
My Commission Expires: $q_{-(3-1)}$	
COUNTY OF MUDISON	
On the T day of SLOT. in the year 12 before me, the undersigned, a Notary Public in and for said State, personally appeared	
Personally known to me or proven to me on the basis of satisfactory evidence to be the individual(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 capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person on behalf of which the individual(s) acted, executed the instrument.	
Notary Signature Official Seal:	
Sarah M. Comman	
Notary Printed Name Notary Public; State of Qualified in the County of Macison My Commission Expires: 8-1-14	
"I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law."	

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