

Document 2014 329

Book 2014 Page 329 Type 03 001 Pages 2

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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

VPREPARED BY/RETURN TO: BOB SIDDENS, 650 - 42ND ST., DES MOINES, IA 50312 515-274-6210 ADDRESS TAX STATEMENT: MYRON HIRSCHMAN: 515 W Fremont St, Winterset, IA 50273 215 E Grade St.

SPECIAL WARRANTY DEED

KNOW ALL MEN BY THESE PRESENTS: That HSBC MORTGAGE SERVICES, INC., in consideration of the sum of One Dollar (\$1.00) and other valuable consideration in hand paid do hereby Convey unto MYRON HIRSCHMAN, the following described real estate, situated in MADISON County, lowa, to wit:

Lot Seven (7) except the West 57 feet thereof, and the South half (S ½) of Lot Six (6) except the West 57 feet thereof, in Block Six (6) of West Addition to the Town of Winterset, Madison County, Iowa; and, a tract of real estate bounded by and included within a line running as follows: Commencing at the Southwest corner of Lot Eight (8) in Block Six (6) of West Addition in the City of Winterset, Iowa, running thence North 99 feet, thence West 16 ½ feet, thence South 99 feet to the Southeast corner of Lot Seven (7) in said Block Six (6), thence East 16 ½ feet to the place of beginning.



subject to easements and covenants of record

I/k/a 515 W Fremont St. Winterset, IA 50273

Warranties shall run from the date grantor became titleholder of record.

And the grantors do Hereby Covenant with the said grantees, and successors in interest, to Warrant and Defend the said premises against the lawful claims of all persons claiming by, through, or under them, except as may be above stated.

This conveyance is an acknowledgment that all prior mortgages held in the name of the Seller herein merged in the Seller upon transfer of title to same and accordingly stand released.

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

Signed this May Sonvary, 2014

HSBC MORTGAGE SERVICES, INC.

Name

Title

Sandra F. Reissman Vice President and Asst. Secretary Administrative Services Division

Acknowledgment attached. (BURTON)

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California	
County of Los Angeles	
On January A, 2014 before me,	MPANCON , Notary Public , (Here insert name and title of the officer) Sandra F Reissman
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. Signature of Notary Public	C. M. PANKONIN Commission # 1996508 Notary Public - California Los Angeles County My Comm. Expires Nov 1, 2016
ADDITIONAL OPTIONAL INFORMATION	
DESCRIPTION OF THE ATTACHED DOCUMENT	INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative
(Title or description of attached document) Title or description continued (Title or description of attached document continued)	acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.
Number of Pages Document Date	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of
(Additional information)	
CAPACITY CLAIMED BY THE SIGNER ☐ Individual (s)	notarization. • Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.

Signature of the notary public must match the signature on file with the office of the county clerk.
 Additional information is not required but could help to ensure this

sufficient area permits, otherwise complete a different acknowledgment form.

Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.

The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a

- Indicate title or type of attached document, number of pages and date.
- Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- · Securely attach this document to the signed document

☐ Attorney-in-Fact

Trustee(s)

☐ Partner(s)

☐ Other ___

(Title)