

DOCUMENT NO.

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SATISFACTION OF LIEN

The undersigned certifies that the following is fully paid and satisfied:

Lien executed against Cecil and Betty Parish

by the WI Dept of Safety and Professional Services and recorded in the office of the Register of Deeds of Richland County, Wisconsin, as Document No 298526, in Vol. 589 / pg 453 (Volume/Page/Etc.)

RECORDED AT 8:30 O'CLOCK a.m.

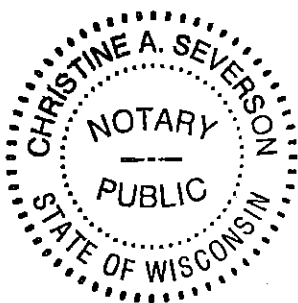
JAN 14 2013 VOL. 599 OF RECORDS PAGE 31 REGISTER OF DEEDS RICHLAND COUNTY, WISCONSIN BY Susan Inggo

covering the real estate described below

Recording Area

The Northeast Quarter of the Northeast Quarter (NE 1/4 NE 1/4) of Section Twenty-Two (22); and the South half of the Southeast Quarter of the Southeast Quarter (S 1/2 SE 1/4 SE 1/4) of Section Fifteen (15), all in Township Nice (9) of Range One (1) West. Also, Twenty (20) feet off the East side of the Southwest Quarter of the Northeast Quarter (SW 1/4 NE 1/4) of Section Twenty-two (22) in Township Nice (9) North, of Range one (1) West and about three (3) rods on the North end of this same twenty (20) feet which extends this road into the Northwest Quarter of the Northeast Quarter (NW 1/4 NE 1/4) of Section Twenty-two (22) same town and range. The Southwest Quarter of the Northeast Quarter (SW 1/4 NE 1/4) of Section Twenty-two (22), except a strip of land used as a public highway off the East side thereof, all in Township Nine (9) North, Range One (1) West.

Department of Safety and Professional Services Attn: Tanya Herranz PO Box 7838 Madison WI 53707-7838



Parcel Identifier No.

If checked here, real estate description continues or appears on attached sheet.

STATE OF WISCONSIN

WI Department of Safety and Professional Services

County of DANE

NAME OF LENDER

This instrument was acknowledged before me

By Tanya Herranz

on October 30th, 2012

Title PECFA Program Specialist

by Tanya D. Herranz (Name of person(s))

\* Tanya D. Herranz

as PECFA Program Specialist (Type of authority, e.g., officer, trustee, etc. if any)

Attest

of WI Department of Safety and Professional Services (Name of party on behalf of whom instrument was executed)

Title

\*

Christine A. Severson

This instrument was drafted & approved by:

Dept of Safety and Professional Services P.O. Box 7970 Madison, WI 53707-7970

Christine A. Severson Notary Public, Wisconsin My Commission expires on October 12th, 2014.

(TYPE OR PRINT)

Dated 30th day of October, 2012

\*Type or print name signed above.