1758181

Recorded
JULY 02, 2007 AT 02:20PM
OUTAGAMIE COUNTY
JANICE FLENZ
REGISTER OF DEEDS
Fee Amount: $13.00

Document Number

STATUTORY RESERVE ACCOUNT STATEMENT

Re: SPENCER VILLAGE
Condominium, being a condominium created under the Condominium Ownership Act of the STATE OF WISCONSIN by a "Declaration of Condominium for SPENCER VILLAGE CONDOMINIUM Condominium", dated the 9th day of AUGUST, 1989 and recorded the 25th day of AUGUST, 1989 in the Office of the Register of Deeds for OUTAGAMIE County, Wisconsin, in (Reel)(Vol.) I 9656 of Records, at (Images) ~~(Pages)~~ 1 through 32, as Document No. 965126 and by a Condominium Plat (hereinafter "Condominium").

The Condominium ~~(MIX)~~ (shall not) have a Statutory Reserve Account, as described in Wis. Stat. § 703.163, effective APRIL 10, 2007, _____. This determination is made by the ~~(Declarant)~~ (Association with the written consent of a majority of the Unit votes).

If the Condominium will not have a Statutory Reserve Account, it is anticipated that future expenditures for the repair and replacement of the common elements will be funded by: non-statutory reserve and assessments on units.

Recording Area

Name and Return Address
SUTTER LAW FIRM
2631 N. MEADE ST., STE. 101
APPLETON, WI 54911

1300 (2)

Parcel Identification Number (PIN)

SEE LEGAL DESCRIPTION ATTACHED.

Dated this 28th day of JUNE, 2007

SPENCER VILLAGE HOMEOWNERS ASSOCIATION BY:

* Sharon A. Huss
Title: President, Spencer Village HOA

* Lea M Peot
Title: Secretary, Spencer Village HOA

AUTHENTICATION

Signature(s) _____

authenticated this _____ day of _____, _____

* _____
TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, _____
authorized by §706.06, Wis. Stats.)

THIS INSTRUMENT WAS DRAFTED BY

ATTORNEY THOMAS H. SUTTER
APPLETON, WISCONSIN
(Signatures may be authenticated or acknowledged. Both are not necessary.)

ACKNOWLEDGMENT

STATE OF WISCONSIN,)
) ss.
OUTAGAMIE County.)

Personally came before me this 28th day of JUNE, 2007, the above named SHARON A. HUSS LEA PEOT to me known to be the person S who executed the foregoing instrument and acknowledged the same.

* _____
Notary Public, State of Wisconsin
My Commission is permanent. (If not, state expiration date: SEPTEMBER 23, 2007.)

*Names of persons signing in any capacity should be typed or printed below their signatures.

Orig to Jim Eeckfeldt + Copy to Lea 7/12/07