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**NOTICE OF CONFIDENTIALITY RIGHTS: IF YOU ARE A NATURAL PERSON, YOU MAY REMOVE OR STRIKE ANY OF THE FOLLOWING INFORMATION FROM THIS INSTRUMENT BEFORE IT IS FILED FOR RECORD IN THE PUBLIC RECORDS: YOUR SOCIAL SECURITY NUMBER OR YOUR DRIVER'S LICENSE NUMBER.**

**LIFE ESTATE DEED**  
(Husband and Wife to Husband and Wife)

**KNOW ALL MEN BY THESE PRESENTS THAT:**

FOR VALUABLE CONSIDERATION OF TEN DOLLARS (\$10.00), and other good and valuable consideration, cash in hand paid, the receipt and sufficiency of which is hereby acknowledged, \_\_\_\_\_ and \_\_\_\_\_, Husband and Wife, hereinafter referred to as "Grantors", do hereby grant, sell, convey, and warrant unto \_\_\_\_\_ and \_\_\_\_\_, Husband and Wife, hereinafter "Grantees", life estates to each in the following lands and property, together with all improvements located thereon, lying in the County of \_\_\_\_\_, State of Texas, to-wit:

Describe Property or State "SEE DESCRIPTION ATTACHED"

Prior instrument reference: Book \_\_\_\_\_, Page \_\_\_\_\_, Document No. \_\_\_\_\_, of the Recorder of \_\_\_\_\_ County, Texas.

LESS AND EXCEPT all oil, gas and minerals, on and under the above described property owned by Grantors, if any, which are reserved by Grantors.

SUBJECT to all easements, rights-of-way, protective covenants and mineral reservations of record, if any.

Taxes for tax year \_\_\_\_\_ shall be ☐ prorated between Grantors and Grantees as of the date selected by Grantors and Grantees, or ☐ paid by Grantees, or ☐ paid by Grantors.

The property herein conveyed ☐ is not a part of the homestead of Grantors, or ☐ is part of the homestead of Grantors and if Grantors are married, the conveyance is joined by both Husband and Wife.

WITNESS Grantor(s) hand(s) this the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Grantor  
{Type Name}

\_\_\_\_\_  
Grantor  
{Type Name}

Signed, Sealed and Delivered  
in the presence of:

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_ (date) by  
\_\_\_\_\_ (name or names of person or persons acknowledging).

\_\_\_\_\_  
Notary Public

Printed Name: \_\_\_\_\_

My Commission Expires:

\_\_\_\_\_

**Grantor(s) Name, Address, phone:**

**Grantee(s) Name, Address, phone:**

**SEND TAX STATEMENTS TO GRANTEE**

