

Prepared By and After Recording Return to:

Send Tax Statements to Grantee (Name and Address):

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WARRANTY DEED
(Reservation of Life Estate)

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 with general warranty covenants unto _____, an individual, hereinafter "Grantee", the following lands and property, together with all improvements located thereon, lying in the County of _____, State of Ohio, to-wit:

INSERT DESCRIPTION OR ATTACH AS EXHIBIT

Auditor's Parcel No. _____.

Prior instrument Reference: Deed Book _____, Page _____, of the Deed Records of _____ County, Ohio.

SUBJECT to Life Estates retained by _____ and _____, Grantors, to run consecutively. It being the intention of the

Grantors that the termination or extinguishing of one Life Estate shall in no way affect the remaining Life Estate.

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

The property herein conveyed ☐ is not a part of the homestead of Grantor(s), or ☐ is part of the homestead of Grantor(s) and the conveyance is joined by both Husband and Wife.

WITNESS Grantors hand(s) this the _____ day of _____, 20 ____.

Signed and Acknowledged in the
Presence of:

(Signature of Witness)

Grantor

(Print or Type Name)

Type or Print Name

(Signature Witness)

(Print or Type Name)

(Signature of Witness)

Grantor

(Print or Type Name)

Type or Print Name

(Signature of Witness)

(Print or Type Name)

STATE OF OHIO

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ (date) by
_____ (name of person acknowledged.)

Notary Public

My commission expires: _____

Type or Print Name

STATE OF OHIO

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ (date) by
_____ (name of person acknowledged.)

Notary Public

My commission expires: _____

Type or Print Name

Grantor(s) Name, Address and phone:

Marital Status:¹

Grantee(s) Name, Address and Phone:

Marital Status

¹ Single or unmarried; married (give name of spouse); divorced and not remarried.