Excise Tax	Recording Time, Book and Page
Mail after recording to:	
This instrument was prepared by:	
Brief description for the Index:	
(Husband to	WARRANTY DEED Himself and Wife)
Grantor(s):	
Grantee(s):	
valuable consideration, cash in hand paid, the reconstruction, hereinand, hereinand sell, and convey unto rights of survivorship and not as tenants in comproperty, together with all improvements , State of North Card	OF TEN DOLLARS (\$10.00), and other good and ceipt and sufficiency of which is hereby acknowledged, fter referred to as "Grantor", does hereby grant, bargain,, Husband and Wife, as joint tenants with amon, hereinafter "Grantees", the following lands and located thereon, lying in the County of polina, to-wit:
Describe Property of State "SEE DESCR  Prior instrument reference: Book,  County, North Caro	Page, Document No, of the Recorder of
LESS AND EXCEPT all oil, gas and min by Grantor, if any, which are reserved by Grantor.	erals, on and under the above described property owned
SUBJECT to all easements, rights-of-way record, if any.	y, protective covenants and mineral reservations of
TO HAVE AND TO HOLD same unto	Grantees, and unto Grantees' assigns forever, with all

GRANTOR does for Grantor and Grantor's heirs, personal representatives, executors and assigns forever hereby covenant with GRANTEES that Grantor is lawfully seized in fee simple of said premises; that the premises are free from all encumbrances, unless otherwise noted above; that Grantor has a good right to sell and convey the same as aforesaid; and to forever warrant and defend the title to the said lands against all claims whatever.

WITNESS Grantor(s) hand(s) this the	day of	, 20
	Grantor {Type Name}	
	Grantor {Type Name}	
STATE OF		
COUNTY OF	-	
I, a Notary Public, do hereby certify that the name of the grantor(s) or maker(s)) personally execution of the foregoing instrument. Witness m official seal		
This the day of	(	year).
(Official seal.)		
	Notary Public	
	Printed Name:	
My Commission Expires:		

Grantor(s) Name, Address, phone:	Grantee(s) Name, Address, phone:
	SEND TAX STATEMENTS TO GRANTEE