Prepared By	1
Name:	
Address:	
State:Zip Code:	
After Recording Return To	
Name:Address:	
State:Zip Code:	
	Space Above This Line for Recorder's Use
GENERAL WAI	RRANTY DEED
STATE OF COUNTY	
KNOW ALL MEN BY THESE PRESENTS, T) in hand paid to
County of, City of	, residing at, . State of
(hereinafter known as the "Grantor(s)") here	
County of, City of	
(hereinafter known as the "Grantee(s)") the f Exhibit A if attached), situated in	
INCEDT LEGAL DESCRIPTION LI	EDE AND/OD ATTACH EVHIDIT AT

INSERT LEGAL DESCRIPTION HERE AND/OR ATTACH EXHIBIT A]

TOGETHER WITH all the rights, members and appurtenances to the Real Estate in anywise appertaining or belonging thereto.



TO HAVE AND TO HOLD, the tract or parcel of land above described together with all and singular the rights, privileges, tenements, appurtenances, and improvements unto the said Grantees, their heirs and assigns forever.

And said Grantors, for said Grantors, their heirs, successors, executors and administrators, covenants with Grantees, and with their heirs and assigns, that Grantors are lawfully seized in fee simple of the said Real Estate; that said Real Estate is free and clear from all Liens and Encumbrances, except as hereinabove set forth, and except for taxes due for the current and subsequent years, and except for any Restrictions pertaining to the Real Estate of record in the Probate Office of said County; and that Grantors will, and their heirs, executors and administrators shall, warrant and defend the same to said Grantees, and their heirs and assigns, forever against the lawful claims of all persons.

IN WITNESS WHEREOF, Grantor has executed and delivered this General Warranty Deed under seal as of the day and year first above written.

Grantor's Signature	Grantor's Signature
Grantor's Name	Grantor's Name
Address	Address
City, State & Zip	City, State & Zip
In Witness Whereof,	
Witness's Signature	Witness's Signature
Witness's Name	Witness's Name
Address	Address
City, State & Zip	City, State & Zip



STATE OF	
COUNTY OF)	
I, the undersigned, a Notary Public in ar	nd for said County, in said State, hereby certify
instrument, and who is known to me, ac	whose names are signed to the foregoing knowledged before me on this day that, being ent, they, executed the same voluntarily on the
Given under my hand this day of _	, 20
	Notary Public
	My Commission Expires: