
space above this line for recorder's use only

This deed was prepared by:

Name: _____
Address: _____
City: _____
State: _____ Zip Code: _____
Phone: _____

After recording, please return to:

Name: _____
Address: _____
City: _____
State: _____ Zip Code: _____
Phone: _____

Mississippi Bar Association Number (only for deeds prepared by an attorney): _____

Mississippi Transfer on Death Deed

I, _____, of _____
with a marital status of _____ and phone number of _____, being
of sound mind and legal capacity, hereby as Grantor convey, effective upon my death, the
following described real property located in Mississippi:

I designate the following primary beneficiary as grantee:

Beneficiary: _____ **Marital Status:** _____
Address: _____
Residential Phone Number: _____ **Business Phone Number:** _____

And I designate the following party to serve as trustee:

Trustee: _____
Address: _____
Business Phone Number: _____



If the beneficiary does not survive me, I designate the following alternate beneficiary as grantee:

Beneficiary: _____ **Marital Status:** _____

Address: _____

Residential Phone Number: _____ **Business Phone Number:** _____

This transfer on death deed is revocable and does not transfer any ownership interest until the death of the owner.

Signature: _____

Owner Printed Name: _____ **Date:** _____

NOTARY ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of Mississippi}
County of _____ }

On _____, 20____, before me, _____
(insert name and title of the officer), personally appeared _____
(seller's name) who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed within the Transfer on Death Deed and acknowledged to me that they executed the same in their authorized capacity, and that by their signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the state of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Notary Public: _____

Print Name: _____

My Commission Expires: _____, 20____

(seal)