
SPACE ABOVE RESERVED FOR REGISTER OF DEEDS OFFICE RECORDING INFORMATION

RETURN TO: _____

TITLE OF DOCUMENT: **ORIGINAL DEATH CERTIFICATE**

GRANTOR: _____ GRANTEE: _____
(DECEASED) (SURVIVORS)

TO WHOM TAX STATEMENT SHOULD BE MAILED TO:

FULL & COMPLETE LEGAL DESCRIPTION:

(INCLUDE LEGAL DESCRIPTION ABOVE OR ATTACH LEGAL DESCRIPTION OTHER PAGE)