

STATE OF IDAHO

WARRANTY DEED

[Individual to Trust]

Control Number – ID - 015 - 77

NOTE ABOUT COMPLETING THE FORMS

The forms in this packet contain “form fields” created using Microsoft Word. “Form fields” facilitate completion of the forms using your computer. They do not limit your ability to print the form “in blank” and complete with a typewriter or by hand.

If you do not see the gray shaded form fields, go to the View menu, click on Toolbars, and then select Forms. This will open the forms toolbar. Look for the button on the forms toolbar that resembles a shaded letter “a”. Click in this button and the form fields will be visible.

The forms are locked which means that the content of the forms cannot be changed. You can only fill in the information in the fields. If you need to make any changes in the body of the form, it is necessary for you “unlock” or “unprotect” the form. **IF YOU INTEND TO MAKE CHANGES TO THE CONTENT, DO SO BEFORE YOU BEGIN TO FILL IN THE FIELDS. IF YOU UNLOCK THE DOCUMENT AFTER YOU HAVE BEGUN TO COMPLETE THE FIELDS, WHEN YOU RELOCK, ALL INFORMATION YOU ENTERED WILL BE LOST.** To unlock click on “Tools” in the Menu bar and then selecting “unprotect document”. You may then be prompted to enter a password. If so, the password is “uslf”. That is uslf in lower case letters without the quotation marks. After you make the changes relock the document before you begin to complete the fields.

After any required changes and re-protecting the document, click on the first form field and enter the required information. You will be able to navigate through the document from form field to form field using your tab key. Tab to a form field and insert your data. If problems, please let us know.

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WARRANTY DEED
 (Individual to a Trust)

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, _____, an individual, married unmarried, hereinafter referred to as "Grantor", does hereby grant, bargain, sell, convey, and warrant unto _____, as Trustee of _____ trust, dated _____, hereinafter "Grantee", the following lands and property, together with all improvements located thereon, lying in the County of _____, State of Idaho, to-wit:

Describe Property or State "SEE DESCRIPTION ATTACHED"

Prior instrument reference: Book _____, Page _____, Document No. _____, of the Recorder of _____ County, Idaho.

LESS AND EXCEPT all oil, gas and minerals, on and under the above described property owned by Grantor, if any, which are reserved by Grantor.

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

TO HAVE AND TO HOLD same unto Grantee, and unto Grantee's heirs and assigns forever, with all appurtenances thereunto belonging.

GRANTOR does for Grantor and Grantor's heirs, personal representatives, executors and assigns forever hereby covenant with GRANTEE 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.

Taxes for tax year _____ shall be prorated between Grantor and Grantee as of the date selected by Grantor and Grantee, or paid by Grantee, or paid by Grantor.

The property herein conveyed is not a part of the homestead of Grantor, or is part of the homestead of Grantor; and if Grantor is married, the conveyance is joined by both Husband and Wife.

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

Grantor
{Type Name}

STATE OF _____

COUNTY OF _____

On this _____ day of _____, in the year of _____, before me, _____, a Notary Public, personally appeared _____, known or identified to me (or proved to me on the oath of _____), to be the person whose name is subscribed to the within instrument, and acknowledged to me that he/she/they executed the same.

(Seal)

Notary Public

Printed Name

My Commission Expires:

Grantor(s) Name, Address, phone:

Grantee(s) Name, Address, phone:

SEND TAX STATEMENTS TO GRANTEE