|  |  |
| --- | --- |
| **Prepared By:**  Name: [PREPARER NAME]  Address: [PREPARER ADDRESS]  [PREPARER CITY, STATE, ZIP]  **After Recording Return To:**  Name: [RECIPIENT NAME]  Address: [RECIPIENT STREET ADDRESS]  [RECIPIENT CITY, STATE, ZIP]  **Transfer Tax:** [TRANSFER TAX AMOUNT ($)] |  |

*Space above this line for recorder’s use only*

**NEW HAMPSHIRE RELEASE DEED**

STATE OF NEW HAMPSHIRE

[COUNTY NAME] COUNTY

KNOW ALL MEN BY THESE PRESENTS, that [GRANTOR NAME(S)], a [GRANTOR(S) MARITAL STATUS], with a mailing address of [GRANTOR(S) MAILING ADDRESS] (hereinafter known as the “Grantor(s)”), for consideration paid, hereby grants to [GRANTEE NAME(S)], a [GRANTEE(S) MARITAL STATUS], with a mailing address of [GRANTEE(S) MAILING ADDRESS] (hereinafter known as the “Grantee(s)”), without any warranties or covenants of title whatsoever, all the rights, title, interest, and claim in or to the following described real estate, situated in [COUNTY NAME] County, New Hampshire, to-wit:

[ENTER PROPERTY LEGAL DESCRIPTION HERE (OR ATTACH AND INSERT)].

[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](http://esign.com/) [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](http://esign.com/)

**Grantor’s Signature Grantor’s Signature**

[GRANTOR NAME] [GRANTOR NAME]

Grantor’s Name Grantor’s Name

[GRANTOR STREET ADDRESS] [GRANTOR STREET ADDRESS]

Street Address Street Address

[GRANTOR CITY, STATE, ZIP] [GRANTOR CITY, STATE, ZIP]

City, State & ZIP City, State & ZIP

STATE OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, whose name is signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they executed the same voluntarily on the day the same bears date.

Given under my hand this \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (mm/dd/yyyy)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Notary Public**

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_