Space above this line for recorder's use only

Prepared By:

After Recording Return To:

Name:	 	
Address: _	 	

Name: ______ Address: ______

OHIO REVOCATION OF TRANSFER ON DEATH DESIGNATION AFFIDAVIT

STATE OF OHIO COUNTY OF _____

CAUTION: THIS REVOCATION MUST BE RECORDED PRIOR TO THE DEATH OF THE GRANTOR IN ORDER TO BE EFFECTIVE.

		, Owner(s), with the martial status of
		, now owner(s) of record of the following real property located at
		, as recorded at instrument
number	of	County deed records, with the following legal
description:		

[WRITE LEGAL DESCRIPTION HERE OR ATTACH EXHIBIT A]

hereby revokes the transfer on death designation affidavit recorded on the date of ______ involving the above referenced property.



Owner Signature:	Date:	
Printed Name:		
Owner Signature:	Date:	
Printed Name:		
Owner Spouse Signature:	Date:	
Printed Name:		
Sworn to and subscribed before me at	County, Ohio on	
(mm/dd/yyyy).		
	Notary Public	
	My Commission Expires:	