STATEMENT OF CONVEYANCE OF HOMESTEAD PROPERTY

To be attached to Conveyance Fee Forms, DTE 100, 100(EX), 100M & 100M(EX)

Grantor's (Seller's) Name					
Grantor's Address					
Grantee's (Buyer's) Name					
Taxing District					
Parcel Account or Registratic	on No.				
Complete This Section the property has or will	•		•		

the property has or will receive the senior citizen, disabled persons, or surviving spouse homestead exemption under Ohio Revised Code section 323.152(A) for the preceding or current tax year. The estimated amount of such reduction that will be reflected in the grantee's taxes is:

Preceding Tax Year \$

Current Tax Year \$

Complete This Section Only If Manufactured or Mobile Home is Transferred The grantor of the manufactured or mobile home referred to above states that the home received the senior citizen, disabled persons or surviving spouse homestead exemption under Ohio Revised Code section 4503.065 for the current tax year. The estimated amount of such reduction that will be reflected in the grantee's taxes is \$

The grantor and the grantee have considered and accounted for the total estimated amount of such

reduction(s) to the satisfaction of both the grantee and the grantor.

Signed By	Signature of Grantor or Representative			
Sworn to or affirmed in my presence, this	day of	year.		
Signed By	Notary Signature			

Endorsement by County Auditor:

Upon presentation of this instrument, the County Auditor shall endorse it, return it to the grantee or his representative, and provide a copy of the endorsed instrument to the grantor or his representative, evidencing delivery to the County Auditor.

J. Craig Snodgrass CPA, CGFM Lorain County Auditor

Date