

STATE OF SOUTH CAROLINA)
)
COUNTY OF _____)
)
IN THE MATTER OF:)
)
_____)
(Decedent))

IN THE PROBATE COURT

**DEED OF DISTRIBUTION
(Real Property Only)
NOT A WARRANTY DEED**

CASE NUMBER: _____

The undersigned states as follows:

Decedent died on _____; and probate of the Estate is being administered in the Probate Court for _____ County, South Carolina, in File # _____.

I/We was/were appointed Personal Representative (s) on _____.

Decedent owned real property described as follows:

Tax Map Number: _____

Street/Property Address: _____

Legal Description: _____

Additional sheet(s) for additional property(ies) is attached (check if applicable)

This transfer is made pursuant to:

- Decedent's Will
- Intestacy Statute: SCPC 62-2-103
- Private Family Agreement: SCPC 62-3-912
- Disclaimer by: _____
- Probate Court Order issued on _____
- Other: _____

In accordance with the laws of the State of South Carolina, the Personal Representative(s) does/do hereby release all of the Personal Representative's(s') right, title and interest, including statutory and/or testamentary powers, over the real property described to the beneficiaries named below:

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Name: _____
Address: _____

Additional sheet(s) for names of additional beneficiaries is attached (check, if applicable)

IN WITNESS WHEREOF the undersigned, as Personal Representative(s) of the above Estate, has executed this Deed of Distribution, on this ____ day of ____, 20__.

SIGNED, SEALED AND DELIVERED
IN THE PRESENCE OF:

Witness: _____
Print Name: _____
Witness : _____
Print Name: _____

Estate of: _____
Signature of Personal
Representative: _____
Print Name: _____

If applicable,
Signature of Co-Personal
Representative: _____
Print Name: _____

STATE OF SOUTH CAROLINA)
)
)

ACKNOWLEDGMENT

COUNTY OF _____

I, _____, Notary Public, a notary for the State of South Carolina do hereby certify that _____, as Personal Representative(s) of the Estate of _____, personally appeared before me this day and acknowledged the due execution of the foregoing Deed of Distribution.

Witness my hand and seal this the ____ day of _____, 20__.

(Signature of Notary Public) (SEAL)

(Print name of Notary Public)
Notary Public for State of _____
My Commission Expires: _____

Note: It is recommended that an attorney prepare this document and determine if a title examination is necessary.