MONTSERRAT

The Registered Land Ordinance 1978

For	Official	Use
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Stamp duty to be impressed here before lodging for registration

	IKANSFEK OJ LAND			
		Registration Section	Block	Parcel
	Title	*********	000 to 100 to	a elett
(1) In BLOCK LETTERS full names and address of the proprietor(s) of the land	I/We .(1)			
	K & K & K X X X X			THE RESERVE OF STREET
	40 21 21 21 21 21 21 21 21 21 21 21 21 21			
	120 th th th th th th th th			08/35/80 to 50 to 5
				54 (01)380 F1 80 60 X
Amount to be written words and fgures	In consideration	of ⁽²⁾	Son exekka	o orozanika ka ka
	the receipt where	eof is hereby acknowledged		
3) In BLOCK LETTERS full name and postal address of transferee(s) for entry in the register	HEREBY TRAN	ISFER TO (3)		or of States and to
	04 04 040 40 40 40 40 40 40 40 40 40 40	THE REPORT OF THE PROPERTY OF THE RESIDENCE OF THE PROPERTY OF THE RESIDENCE OF THE RESIDENCE OF THE PROPERTY OF THE RESIDENCE OF THE RESIDENC	C K # 40 W # W 100 4 14	ne ne sa nesten es e
4) Any special clauses should be continued overleaf. The attestation clause should then be added at the end				
	5 % W & & & & & \$			
	333668888	**********		N 18 12 (2.020/20.2
	the land compris	ed in the above-mentioned title.		
5) Strike out or complete as eccessary		mereby declare that they hold the land as summon in the following undivided shares:		
	Dated this	day of	ajr s s s s s s s . 2	20
6) Add additional attestation clauses overleaf as required. N.B. Both Transferor(s) and Fransferee(s) must sign	identified to me and	me who has/have been satisfactorily who acknowledge/s that he/she/they ntarily executed this instrument and		
	Signature of Public 0	Officer		
7) Public Officers: See Schedule to Ordinance and rules for full list.	Name of Public Office Signed in my presen	cer (f)		
Public Officers include a Notary Public & Commissioner for Oaths.	who is/are known to identified to me and	me who has/have been satisfactorily who acknowledge/s that he/she/they ntarily executed this instrument and		
	Signature of Bull's	Officer		
	11	Officer		
	Name of Public Offi	cer		