



OFFICIAL PROPERTY OWNERSHIP ACKNOWLEDGMENT & RECEIPT

LEGAL OWNER DETAILS

|                 |                   |
|-----------------|-------------------|
| Full Name:      | Kizziar Sandra    |
| Date of Birth:  | August 21, 1957   |
| Gender:         | Female            |
| Contact:        | +1 (806) 751-1562 |
| Height:         | 5' 01"            |
| Eye Color:      | Brown             |
| Marital Status: | Engaged           |
| Occupation:     | Retired           |
| Religion:       | Christian         |
| Children:       | 1                 |

REAL ESTATE AGENT DETAILS

|                 |                   |
|-----------------|-------------------|
| Full Name:      | Linda Rose        |
| Date of Birth:  | February 15, 1979 |
| Height:         | 5' 05"            |
| Eye Color:      | Blue              |
| Marital Status: | Married           |
| Occupation:     | Real Estate Agent |
| Religion:       | Christian         |
| Children:       | 2                 |

ATTORNEY DETAILS

|                 |                               |
|-----------------|-------------------------------|
| Full Name:      | Douglas Robert                |
| Date of Birth:  | November 23, 1949             |
| Contact:        | +1 (445) 279-9573             |
| Height:         | 5' 03"                        |
| Eye Color:      | Grey                          |
| Marital Status: | Widower                       |
| Occupation:     | Attorney                      |
| Religion:       | Christian                     |
| Family Details: | 7 Children / 17 Grandchildren |



### STATEMENT OF PAYMENT & TITLE TRANSFER

This document confirms that the subject property was purchased by **MR. TURNER MICHAEL**. Full legal ownership rights and title have been formally granted to **KIZZIAR SANDRA**.

As per the executed agreement, all property insurance fees, administrative costs, and associated recurring bills will be deducted directly from the life insurance policy/funds of **Mr. Turner Michael**.

### AUTHORIZATION & SIGNATURES

**Purchaser / Funding Party:**

Name: Mr. Turner Michael

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Legal Attorney:**

Name: Douglas Robert

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Authorized Agent:**

Name: Linda Rose

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Property Owner:**

Name: Kizziar Sandra

Signature: \_\_\_\_\_

Date: \_\_\_\_\_