Office of Finance, Treasury Division
No Consideration Deed Affidavit

Tax Identification No(s):__________________________

Section 1: Relationship of Parties (Please initial all that apply)

I/We certify under the penalties of perjury, that the following are accurate responses regarding the transfer we are offering for record on this date.

_______ Spousal Transfer (Exempt from County Transfer and State Recordation Taxes) Tax Property Article 12-108(c)(1)

Name_________________________ Name_________________________

Spouse Spouse


Name_________________________ Name_________________________

Name_________________________ Name_________________________

Parent Parent

Child Child

_______ Sibling Transfer (Exempt from State Recordation Tax)(Specify Relationship) Tax Property Article 12-108(c)(6)

Name_________________________ Name_________________________

Sibling Sibling

_______ Other family relationships – No relationship (No exemptions apply on outstanding mortgage balance)

Please cite a code if you are claiming an exemptions

Name_________________________ Name_________________________

Relationship_________________________ Relationship_________________________

Section 2: Outstanding Mortgage Balance(s)

I/we certify under the penalties of perjury that the following are accurate responses regarding all the unpaid principal mortgage balances currently encumbering the above referenced property

<table>
<thead>
<tr>
<th>Liber/Folio</th>
<th>Original Loan Amount</th>
<th>Unpaid PRINCIPAL Mort Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I/we understand that if I/we fail to truthfully answer or provide information to avoid collection of County Transfer and State Recordation Tax, I/we may be found guilty of a misdemeanor and, on conviction, may be subject to a fine not exceeding $5,000.00 or imprisonment not exceeding eighteen (18) months or both; and I/we authorize Prince Georges County to take the appropriate steps necessary to confirm and verify the information made on this affidavit.

___________________________________________
Signature of Grantor

___________________________________________
Signature of Grantor

In the State of ___________________________, at the County/City of ___________________________,

I HEREBY CERTIFY, on this _______ day of _______________, 20______, before me, the subscriber, a Notary Public, in and for said State and County/City, personally appeared, __________________________________________________________, known to me to be, (or satisfactorily proven) to be the person(s) whose name(s) is/are subscribed to the within affidavit, and acknowledged that he/she/they executed that same for the purposes therein contained, and further acknowledge the information therein is correct, and in my presence signed and sealed the same.

My Commission Expires: _____/_____/_______

___________________________________________
Notary Public Signature

Rev 02/16 (This form may be copied but not altered)