FFIC NO _____ FEE _____ LOT/unit _____ BLK/bldg _____ ASSESSMENT $ _____ OwnerAmt: $ _____

CLIENT NO _____ Subdivision _____ GROSS _____ HX: _____ OwnerInsured: _____

CLIENT NAME _____ _____ PAID _____ DATE _____ _____

COUNTY _____ PLAT B/P _____ _____ DUE _____ DELINQ _____ LoanAmt $ _____

EFFECTIVE DATE: _____ Type Search: _____ _____ LoanInsured: _____

FFICorporation

INITIALS: _____ EstateType _____ PriorInfo _____ Vested _____

TAX I D: _____

Date Searched _____

ITEM	TYPE	DATED	FILED	BOOK	PAGE	GRANTOR	GRANTEE	REMARKS
	WD							
	MTG							
	AsnMtg							
	UCC-1							
	WD							
	QCD							
	WD							
	WD							
	WD							
	WD							
	WD							