# RECORDING TRANSMITTAL

To:

**Board of County Commissioners**
**Broward County, Florida**
**Records Taxes & Treasury Division**
**RECORDING SECTION**
**115 South Andrews Avenue**
**Room 114**
**Fort Lauderdale, FL 33301**

**P.O. Box 14668**
**Fort Lauderdale, FL 33302**

**Phone: (954) 831-4000**
**E-Mail: records@broward.org**

Date: .....

From:
Address:

Contact: .....

Phone: .....

Re: File # .....

Other .....

**Please record the following documents IN THE EXACT ORDER LISTED:**

| Document Description | Number of | | Fee Description | For Transfers of Interest In Property Only | | Fee Amount |
|---|---|---|---|---|---|---|
| | Pages | Names | | Tax Calculated on: | Parcel ID # | |
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**Special Instructions:**

**Total Fees**: ----------➢

**Payments**:

☐ The following checks are enclosed:-paid to **BROWARD COUNTY BOCC**
# _____ $ _____ # _____ $ _____
# _____ $ _____ # _____ $ _____

**RETURN DOCUMENTS VIA:**
☐ Mail ☐ Will-Call Box # _____ ☐ Other: _____