

<p>This recording was requested by:          _____ (Name)</p> <p>After recording, mail this deed and tax statements to:          _____ (Name)          _____ (Address)          _____ (City / State / Zip)</p> <p>Assessor's Parcel No.: _____</p>	<p style="text-align: center;">Above space for recorder's use only          (Note: Check your state &amp; county-specific recording requirements          for legal documents)</p>
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## QUITCLAIM DEED

This Quitclaim Deed is dated as of \_\_\_\_\_ (effective date) and is entered into by and between the following parties:

\_\_\_\_\_ (name of grantor), [ ] individual [ ] corporation, whose mailing address is \_\_\_\_\_ (address of grantor).

AND

\_\_\_\_\_ (name of grantee), whose mailing address is \_\_\_\_\_ (address of grantee).

For the consideration of \_\_\_\_\_ \$ (dollar amount of sum), and other good and valuable consideration, receipt of which is hereby acknowledged, the Grantor does hereby convey, release and forever quitclaim unto the Grantee the real property and premises situated in \_\_\_\_\_ (name of county), State of \_\_\_\_\_ and described as follows:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_, together with all the improvements thereon and the appurtenances thereto belonging.

TAX PARCEL ID#: \_\_\_\_\_

GRANTOR SIGNATURE(S): \_\_\_\_\_

WITNESS (if required): \_\_\_\_\_

EXECUTED AND DELIVERED on the DATE: \_\_\_\_\_ STATE of:

\_\_\_\_\_

COUNTY of: \_\_\_\_\_

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF \_\_\_\_\_ } COUNTY

OF \_\_\_\_\_ }

On \_\_\_\_\_ before me, \_\_\_\_\_ (name and title of the officer), personally appeared \_\_\_\_\_, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature \_\_\_\_\_ (Seal)