

**QUIT CLAIM DEED**

KNOW ALL MEN BY THESE PRESENTS: That \_\_\_\_\_

whose address is: \_\_\_\_\_

Quit Claim to: \_\_\_\_\_

whose address is: \_\_\_\_\_

the following-described premises situated in the \_\_\_\_\_ of \_\_\_\_\_, County of \_\_\_\_\_ and State of Michigan, to-wit:

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

Parcel Identification No.: \_\_\_\_\_

Commonly known as: \_\_\_\_\_

together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, for the sum of \$\_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signed in the presence of:

Signed By:

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

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

STATE OF MICHIGAN            )  
  )SS  
COUNTY OF \_\_\_\_\_)

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Acting in \_\_\_\_\_ County, Michigan  
My commission expires: \_\_\_\_\_

DRAFTED BY:

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WHEN RECORDED RETURN TO:

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