

QUIT CLAIM DEED

KNOW ALL MEN BY THESE PRESENTS THAT:

Whose address is:

QUIT CLAIMS TO:

Whose address is:

The following described premises in the City/Township of _____ County of Genesee
and State of Michigan to wit:

Parcel ID#:

Property Address:

For the sum of

Dated:

Signed: _____
Printed name

Signed: _____
Printed name

Subscribed and sworn to before me, a notary public, on _____.

Notary Signature _____
Printed Notary Name

Drafted By:

After recording, return to: