Quit Claim Deed

This instrument was prepared by:		
Name		
		_
Address 1		
Address 2		-
City	State Zip	
		This space is for Recorder's use

QUIT CLAIM DEED

THIS INDENTURE WITNESSETH, that the Grantor,
and QUIT CLAIMS to
Whose address is:
all interest in the following described real estate, to wit:
Commonly known as:
Permanent Parcel No:
SUBJECT TO THE EASEMENTS, COVENANTS, AND RESTRICTIONS OF RECORD.
Hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.
Dated thisday of, 20
(Signature of Granter)

_____(Printed Name of Grantor)

STATE OF ILLINOIS)
) SS
COUNTY OF MADI SON	I)

I, the undersigned, a Notary Public in and for said County and State aforesaid, DO HERBY CERTIFY THAT _____

Personally known to me to the same person whose name is subscribed to the forego ing instrument, as having executed the same, appeared before me this day in person and acknowledged that he/she signed, sealed and delivered the said instrument as his/her free and voluntary act for the uses and purposed therein set forth, including the release and waiver of the right of homestead given under my hand and Notary Seal this

_____day of______, 20_____, 20_____.

Notary Public

Exempt under provisions of Paragraph	, Section 31-45 of the Real Estate	Transfer Ta	ix
Law (35 ILCS 200/31-45).			

Date

Return Document to:

Buyer, Seller, or Representative

 Name
 Address 1

Future Taxes to:

Address 2

City

Address 1

Name

State Zip

State Zip



Address 2

City