(Top 3 inches reserved for recording data)

ASSIGNMENT OF CONTRACT FOR DEED AND QUIT CLAIM DEED by Business Entity	Minnesota Uniform Conveyancing Blank Form 30.3.6 (201
DEED TAX DUE: \$	DATE:
FOR VALUABLE CONSIDERATION,	(montacopy car)
(insert name of Gr.	rantor)
a under the la	ws of
("Grantor"), sells, assigns, and transfers to	
(insert name of ea	ach Grantee)
("Grantee"), Grantor's interest in that Contract for Deed ("Contract") dated _	, made by
	(month/day/year)
(insert name of Se	eller)
as Seller, and	name of Purchaser)
as Purchaser, and recorded on, as [Document Number (or in Book
of	corder Registrar of Titles of
County, Minnesota, for the sale and conveyance of real property in said County,	inty and State described as follows:
Check here if all or part of the described real property is Registered (Torrens	s) 🗆
together with all hereditaments and appurtenances belonging thereto.	
By acceptance hereof, Grantee assumes and agrees to keep and perform all Grantor covenants that there remains unpaid under the Contract the principal	al sum of
Dollars (\$) with interest thereon from
and that Grantor has good right to sell, transfer, and assign the Contract.	(топилдаулуваг)
In addition, Grantor hereby conveys and quit claims the real property to	o Grantee, including after acquired title.

THIS INSTRUMENT WAS DRAFTED BY:

(insert name and address)

TAX STATEMENTS FOR THE REAL PROPERTY DESCRIBED IN THIS

INSTRUMENT SHOULD BE SENT TO:

(insert legal name and residential or business address of Grantee)

Check applicable box: ☐ The Seller certifies that the Seller does not know of any wells on	Grantor	
the described real property. A well disclosure certificate accompanies this document or has been electronically filed. (If electronically filed, insert WDC	(name of Grantor)	
number: I am familiar with the property described in this instrument and I certify that the status and number of wells on the described real property have not changed since the last previously filed well disclosure certificate.	(signature) Its:(type of authority)	
State of Minnesota, County of	-	
This instrument was acknowledged before me on	, by	
(month/da)	//year) as	(name of authorized signer)
and by		(type of authority)
(name of auti	horized signer)	
as of	(na	me of Grantor)
(Stamp)		
	(signature of notarial officer)	
	Title (and Rank):	
	My commission expires:	
	, , , , , , , , , , , , , , , , , , , ,	(month/day/year)