

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)
)§
COUNTY OF)

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ by _____.

Notary Public
County, Michigan
Acting in _____ County, Michigan
My commission expires: _____

WHEN RECORDED RETURN TO:

DRAFTED BY:
