Prepared By and After Recording Return to:	
Send Tax Statements to Grantee (Name and Address):	
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QUITCLAIM DEED

[Individual to Two Individuals as Joint Tenants]

THIS DEED N	Made this	day of	,, between	
			, whose legal address is	
			_ of the said County of	and State
of	, grantor, and			_, whose legal address
is			of the said County of	and
State of	, and	11		, whose legal
address is			of the said Count	ty of
and State of		grantees:		

WITNESS, that the grantor, for and in consideration of the sum of _____ DOLLARS, the receipt and sufficiency of which is hereby acknowledged, has granted, bargained, sold and conveyed, and by these presents does hereby remise, release and quitclaim, unto the grantee, as joint tenants and not as tenants in common, grantee's heirs and assigns forever, all the real property, together with improvements, if any, situate, lying and being in the said County of _____ and State of Colorado described as follows:

also known by street and number as:

TO HAVE AND TO HOLD to the said Grantees as joint tenants, with right of survivorship, their heirs, personal representatives, executors and assigns forever: it being the intention of the parties to this conveyance, that (unless the joint tenancy hereby created is severed or terminated during the joint lives of the grantees herein) in the event one Grantee herein survives the other,

the entire interest in fee simple shall pass to the surviving Grantee, and if one does not survive the other, then the heirs and assigns of the Grantees herein shall take as tenants in common.

TOGETHER with all and singular the hereditaments and appurtenances thereto belonging, or in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof, and all the estate, right, title, interest, claim and demand whatsoever of the grantor, either in law or equity, of, in and to the above bargained premises, with the hereditaments and appurtenances.

IN WITNESS WHEREOF, the grantor has executed this deed on the date set forth above.

	Grantor
	Type or Print Name
State of))SS.	
County of) The foregoing instrument was acknowledged to	before me this day of
Witness my hand and official seal.	
	Signature/Title of Officer
My commission expires:	Type or Print Name
Grantor(s) Name, Address and phone:	Grantee(s) Name, Address and Phone: