

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: *Month* *Day* *Year*

Signed: _____
Printed name

The foregoing instrument was acknowledged before me this *Mo* *Day* , *Yr* by _____
_____ to be his/her/their free act and deed.

Notary Signature _____
Printed Notary Name
Notary Expiration Date

Drafted By (name)
(address)

Return To (name)
(address)