

**QUIT CLAIM DEED**

**KNOW ALL MEN BY THESE PRESENTS,** That on \_\_\_\_\_, day of \_\_\_\_\_, 200\_\_\_\_\_

for the sum of

whose address is

**QUIT CLAIM TO**

whose address is

The following described premises situated in the \_\_\_\_\_ County, Michigan, to wit:

Together with all and singular the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

SIGNED IN THE PRESENCE OF:

SIGNED BY:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

STATE OF MICHIGAN

-ss-

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_\_

By \_\_\_\_\_.



\_\_\_\_\_  
Notary Public  
\_\_\_\_\_ County, Michigan  
My Commission expires: \_\_\_\_\_

810 • 987 • 2141      1 • 800 • 878 • 4853      FAX 810 • 987 • 1317

330 MICHIGAN STREET • PORT HURON, MI 48060-3855

E-MAIL: HURON@HURON TITLE.COM

Tax Code No. \_\_\_\_\_

Michigan Transfer Tax \$ \_\_\_\_\_

**DRAFTED BY:**

**WHEN RECORDED RETURN TO:**