QUIT CLAIM DEED

Prepared By		ı	l			
Name:						
Address:						
	Zip Code:					
After Recording	Return To					
Name:						
State:	Zip Code:					
			Spa	ce Above This Line for R	ecorder's	Use
STATE OF MICH	IIGAN					
COUNTY OF						
KNOW ALL MEN	I BY THESE PRE	SENTS, Th	hat _		_, a	
	, residing at			, County of	·	City
of	, State of			(hereinafter known as th	ie	
				, a		_,
				, City of		
				the "Grantees(s)") for the		
) and releases		
				ribed real estate, situated		,
	, Michigar			,		



Parcel Identification No.:				
Commonly known as:				
thereunto belonging or in anyw	vise appertain ver for the sa	th all and singular the appurtenances ing, and all the estate, right, title, interest, id first party, either in law or equity, to the aid second party forever.		
Grantor's Signature		Grantor's Signature		
Grantor's Name		Grantor's Name		
Address		Address		
City, State & Zip		City, State & Zip		
STATE OF MICHIGAN)				
COUNTY OF)			
thatinstrument, and who is known	v to me, ackno	or said County, in said State, hereby certify whose names are signed to the foregoing wledged before me on this day that, being hey, executed the same voluntarily on the		
Given under my hand this	_ day of	, 20		
	No	tary Public		
	My	Commission Expires:		

