

QUIT CLAIM DEED

Joint Tenancy Illinois Statutory

MAIL TO: _____

NAME & ADDRESS OF TAXPAYER:

RECORDER'S STAMP

THE GRANTOR _____

of the _____ of _____ County of _____ State of _____

for and in consideration of _____ DOLLARS
and other good and valuable considerations in hand paid.

CONVEY and QUIT CLAIM to _____

(GRANTEE'S ADDRESS) _____

of the _____ of _____ County of _____ State of _____

not in Tenancy in Common, but in JOINT TENANCY, all interest in the following described Real Estate situated in the
County of Grundy, in the State of Illinois, to wit:

NOTE: If additional space is required for legal - attach on separate 8-1/2 x 11 sheet.

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.
TO HAVE AND TO HOLD said premises not in tenancy in common, but in joint tenancy forever.

Permanent Index Number(s) _____

Property Address : _____

DATED this _____ day of _____ 20 _____.

_____ (Seal) _____ (Seal)

_____ (Seal) _____ (Seal)

_____ (Seal) _____ (Seal)

_____ (Seal) _____ (Seal)

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

STATE OF ILLINOIS)
COUNTY OF GRUNDY) ss

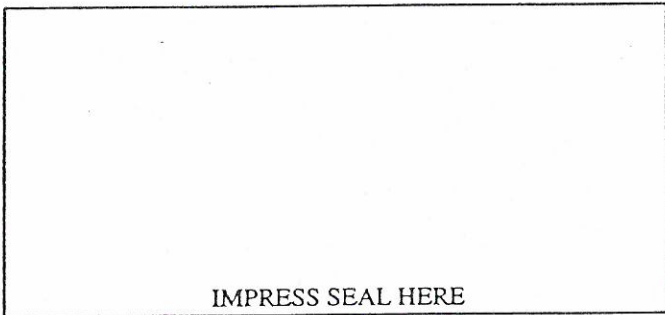
I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT

_____ personally known to me to be the same person _____ whose name _____ subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that _____ signed, sealed and delivered the said instrument as _____ free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

Given under my hand and notarial seal, this _____ day of _____, 20__.

Notary Public

My commission expires on _____, 20__



GRUNDY COUNTY - ILLINOIS TRANSFER STAMP

EXEMPT UNDER PROVISIONS OF PARAGRAPH _____ SECTION 4, REAL ESTATE TRANSFER ACT

NAME AND ADDRESS OF PREPARER:

DATE:

Buyer, Seller or Representative

** This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument: (Chap. 55 ILCS 5/3-5022).

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FROM

TO

Issued by Recorder for use in
Grundy County, Illinois

KAY T. OLSON
GRUNDY COUNTY CLERK & RECORDER
111 E. Washington St. Room 12
PO Box 675
Morris IL 60450

Telephone 815-941-3224
Fax 815-942-2222