

QUIT CLAIM DEED

Document Number

Document Name

THIS DEED, made between _____

_____ ("Grantor," whether one or more),

and _____

_____ ("Grantee," whether one or more).

Grantor, quit claims to Grantee the following described real estate, together with the rents, profits, fixtures and other appurtenant interests, in _____ County, State of Wisconsin ("Property") (if more space is needed, please attach addendum):

Recording Area

Name and Return Address

Parcel Identification Number (PIN)

This _____ homestead property.

(is) (is not)

Dated _____

* _____ (SEAL) _____ (SEAL)

* _____ (SEAL) _____ (SEAL)

AUTHENTICATION

ACKNOWLEDGMENT

Signature(s) _____

authenticated on _____

* _____

TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, _____
authorized by Wis. Stat. § 706.06)

THIS INSTRUMENT DRAFTED BY:

STATE OF WISCONSIN)
) ss.
_____ COUNTY)

Personally came before me on _____ ,
the above-named _____

to me known to be the person(s) who executed the
foregoing instrument and acknowledged the same.

* _____

Notary Public, State of Wisconsin
My Commission (is permanent) (expires: _____)

(Signatures may be authenticated or acknowledged. Both are not necessary.)

NOTE: THIS IS A STANDARD FORM. ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.

QUIT CLAIM DEED

STATE BAR OF WISCONSIN

FORM No. 3-2003

*Type name below signatures.