

# QUIT CLAIM DEED

Statutory (Illinois)

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 \_\_\_\_\_

all interest in the following described Real Estate situated in the County of McHenry, 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.

Permanent Index Number(s) \_\_\_\_\_

Property Address : \_\_\_\_\_

DATED this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_\_.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (Seal) \_\_\_\_\_ (Seal)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (Seal) \_\_\_\_\_ (Seal)

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES



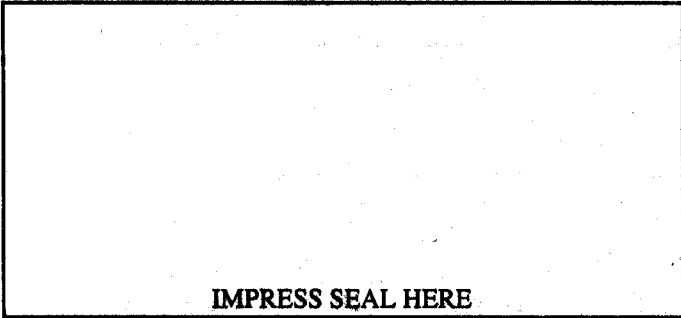
I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT

\_\_\_\_\_ 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 \_\_\_\_\_, 19\_\_.

\_\_\_\_\_  
Notary Public

My commission expires on \_\_\_\_\_, 19\_\_



McHENRY COUNTY - ILLINOIS TRANSFER STAMP

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

DATE: \_\_\_\_\_

\_\_\_\_\_  
Buyer, Seller or Representative

NAME AND ADDRESS OF PREPARER:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\* 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).

**QUIT CLAIM DEED**  
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FROM \_\_\_\_\_

TO \_\_\_\_\_

Printed by Recorder for use in  
McHenry County, Illinois

**PHYLLIS K. WALTERS**  
McHenry County Recorder

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