

# Quit Claim Deed

## ILLINOIS STATUTORY

MAIL TO:

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

NAME & ADDRESS OF TAX PAYER:

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

### THE GRANTOR(S)

\_\_\_\_\_, of the Cook County of the State of Illinois for and in consideration of Ten (\$10.00) DOLLARS and other good and valuable consideration(s) in hand paid,

CONVEY AND QUIT CLAIM to \_\_\_\_\_, \_\_\_\_\_

of the County Cook and the State of Illinois, all interest in the following described real estate situated in the County of Cook, in the State of Illinois, to wit:

(LEGAL DESCRIPTION)

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

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 the above granted premises unto the parties of the second part forever, not as joint tenants or tenants by the entirety, but as tenants in common.

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

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

Dated this \_\_\_ day of \_\_\_\_\_, 2000

\_\_\_\_\_  
(Print or type name here) (Seal)

STATE OF ILLINOIS )

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES

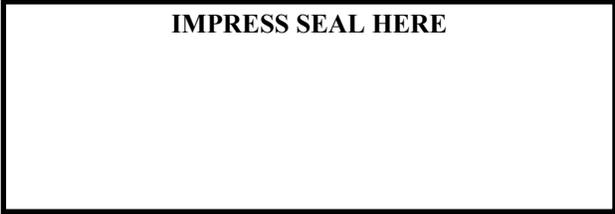
County of \_\_\_\_\_ ) SS.  
County of \_\_\_\_\_ )

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, CERTIFY THAT, **(Print or type name here)** \_\_\_\_\_ personally known to me to be the same persons whose names are subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that they signed, sealed and delivered the 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 notaries seal, this \_\_\_\_ day of \_\_\_\_\_, 2000.

*Notary Public*

My commission expires on \_\_\_\_\_.



- If Grantor is also Grantee you may want to strike Release & Waiver of Homestead Rights.

NAME AND ADDRESS OF PREPARER:

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

EXEMPT UNDER PROVISIONS OF PARAGRAPH  
SECTION 4,

REAL ESTATE TRANSFER ACT.

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

\_\_\_\_\_  
Signature of Buyer, Seller or Representative.

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