QUITCLAIM DEED (Individual)

| STATE OF INDIANA | Return Once Recorde |
|--|---|
| COUNTY | Name:Address: |
| | Mail Future Tax Statement Name: |
| | Address: |
| . THE PARTIES | |
| LET IT BE KNOWN TO ALL, this agreemen ; re | t is made between the following parties: siding at:,, |
| ,, who shall be identified as t | ne "GRANTOR"; and |
| ; res | iding at:,, |
| ,, who shall be identified as | the "GRANTEE." |
| 2. In this quitclaim deed made effective as of | ; For the consideration of |
| | or \$ |
| 3. The GRANTOR does hereby remise, release property described below, located at the follow | |
| | |
| | |
| | |
| (For Official | ıl Use Only) |

| The property with the State Parcel ID | , has the following |
|---|---|
| landmarks and boundary lines: | |
| | |
| Additionally, the property has the following metes and | d bounds: |
| | |
| | |
| | |
| This deed contains the following documents (Select on | e): |
| ☐ Supplemental Description☐ Map | |
| ☐ Plot plan | |
| | |
| This instrument is prepared by: | |
| | |
| | |
| | |
| ffirm under penalties of perjury, that I have taken reason aber in this document, unless required by law." | nable care to redact each social security |
| noor in this document, antecorrequired by the | |
| | |
| | |
| confirmation hereof, the Grantor has executed and efirst mentioned above. | d attested this document on the |
| _ | (Grantor's Signature) |
| | (Grantor 8 Signature) |
| - | (Grantor's Printed Name) |

NOTARY ACKNOWLEDGMENT

| State of Indiana County of | | |
|-------------------------------|---------------------|---|
| | , to me k | personally nown to be the person described in and who hat such person executed the same as such |
| | | Notary's Signature |
| Notary Name: | | |
| Date: | | |
| My Commission Expires: | | |
| | (For Official Use C | Only) |