

(For Official Use Only)

QUITCLAIM DEED (Individual/Joint)

STATE OF MISSOURI
_____ COUNTY

1. THE PARTIES

LET IT BE KNOWN TO ALL, this agreement is made between the following parties:

(Select One)

- _____ an unmarried individual;
- _____ and _____, a married pair; residing at:
_____, _____, _____, _____, who shall be identified as the
“GRANTOR(s)”; and
- _____ a married / unmarried individual, residing 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 and forever quitclaim unto the Grantee all the right, title,
and interest the Grantor may have in and to the **property** described below.

4. PROPERTY DESCRIPTION

I. The aforementioned **property** is located at the following address:
_____, _____, _____, _____;
_____ county.

II. The legal description of the *property* is as follows:

III. This deed contains the following documents (Select one):

- Supplemental Description
- Map
- Plot plan

IV. The property description above is as: (Select one)

- Recorded in the deed _____ registered in the Register's Office at _____ County, Missouri.
- Recorded in a new survey conducted on _____ , registered/unregistered: _____.

5. Homestead Status.

- The Property is NOT registered as the Homestead.
- The Property is registered as the Homestead.
 - The Grantor is unmarried.
 - A Spousal Waiver of Rights to the Property is included.

In confirmation hereof, the Grantor has executed and attested this document on the date first mentioned above.

Grantor Signature

Grantee Signature

Grantor (Name)

Grantee (Name)

NOTARY ACKNOWLEDGMENT

Commonwealth of Missouri
County of _____

On _____, before me, _____ personally appeared _____, to me known to be the person described in and who executed the foregoing instrument, and acknowledged that such person executed the same as such person's free act and deed.

Notary's Signature

Notary Name: _____
Date: _____
My Commission Expires: _____

(Seal)