**QUITCLAIM DEED**  
(Individual/Joint)

|  |  |  |
| --- | --- | --- |
| STATE OF KANSAS  COUNTY |  | RETURN INFORMATION:  Name:  Address:    Phone Number: |

1. **THE PARTIES**

LET IT BE KNOWN TO ALL, this quitclaim deed is made on                          between the

following parties:

* 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”.

1. In this quitclaim deed made effective as of for the consideration of or $ .

*KANSAS REAL ESTATE SALES VALIDATION QUESTIONNAIRE*

* A completed Real Estate Sales Validation Questionnaire is attached herewith.
* This deed is exempt from the Real Estate Sales Validation Questionnaire, pursuant to Kansas Code 79-1437e (a)         .

Other:                                                                                                                             .

1. The Grantor(s) hereby ***release and forever quitclaim*** unto the Grantee all the right, title, and interest the Grantor may have in and to the *property* described above.
2. **PROPERTY DESCRIPTION**
3. The *property* is located at the address:                                   ,                            ,

                      ,                         ; In the county of                                                          .

1. The legal description for the *Property* with the Parcel ID No.             is as follows:

|  |
| --- |
|  |

1. This deed contains the following documents attached *(Select one)*:

* Supplemental Description
* Map
* Plot plan

1. **Homestead Status** *(select all that apply)*:

* 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(s) execute and attest to this document on the date first mentioned above.***

|  |  |  |
| --- | --- | --- |
| Grantor’s Signature |  | Grantor’s Signature |
| Grantor’s Name |  | Grantor’s Name |
|  |  |  |

**NOTARY ACKNOWLEDGMENT**

State of Kansas  
County of

On this day                       , before me                                                       , personally appeared                                 , to me known to be the person (or persons) described in and who executed the foregoing instrument, and acknowledged that such person executed the same as such person’s (or persons’) free act and deed.

Notary’s Signature

Notary Name:

Date:

My Commission Expires:

(Seal)