**QUITCLAIM DEED**  
(Individual/Joint)

|  |  |  |
| --- | --- | --- |
| STATE OF MONTANA COUNTY |  |  |

1. 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 $                                                       .

* The figure above is the full and complete taxable value.
  + Form RTC has been completed and submitted with this document.
* This deed is tax exempt as pursuant to Mont. Code § 115-7-307

                                                                                                                                            .

1. The Grantor(s) do hereby ***remise*, *release and forever quitclaim*** unto the Grantee all the right, title, and interest the Grantor may have in and to the *property* described below; TO HAVE AND TO HOLD to the said GRANTEE forever.
2. **PROPERTY DESCRIPTION**
3. The *property* located at the address: ,   
                ,              ,                     ; in the county of          .
4. The *property* is described 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 Montana  
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)