

# Karen A. Stukel

WILL COUNTY RECORDER

## QUIT CLAIM DEED

### Joint Tenancy Illinois Statutory

MAIL TO:

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

NAME & ADDRESS OF TAXPAYER:

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

RECORDER'S STAMP

THE GRANTOR: \_\_\_\_\_

of the \_\_\_\_\_ of \_\_\_\_\_ County of \_\_\_\_\_ State of \_\_\_\_\_

for and in consideration of \_\_\_\_\_ DOLLARS

and other good and valuable considerations in hand paid.

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

\_\_\_\_\_

(GRANTEE'S ADDRESS) \_\_\_\_\_

of the \_\_\_\_\_ of \_\_\_\_\_ County of \_\_\_\_\_ State of \_\_\_\_\_

not in Tenancy in common, but in JOINT TENANCY, the following described Real Estate situated in the County of Will, State of Illinois, to wit:

(NOTE: If additional space is required for legal, attach on separate 8-1/2" x 11" sheet.)

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 said premises not in tenancy in common, but in Joint Tenancy forever.

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

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

DATED this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (Seal)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (Seal)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (Seal)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (Seal)

**NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES.**

**STATE OF ILLINOIS     )**  
**County of Will            ) ss**

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT

\_\_\_\_\_  
Personally known to me to be the same person \_\_\_\_\_ whose name \_\_\_\_\_ subscribed to the foregoing Instrument, appeared before me this day in person, and acknowledged that \_\_\_\_\_ signed, sealed and delivered the said 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 notarial seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

(Seal)

\_\_\_\_\_

Notary Public

My commission expires on \_\_\_\_\_, 20\_\_\_\_\_.

**MUNICIPAL TRANSFER STAMP (If Required)**

**WILL COUNTY/ILLINOIS TRANSFER STAMP**

NAME & ADDRESS OF PREPARER:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EXEMPT** under provisions of Paragraph \_\_\_\_\_  
Section 31-45, Property Tax Code.

Date: \_\_\_\_\_

\_\_\_\_\_  
Buyer, Seller or Representative

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

**QUIT CLAIM DEED**  
Joint Tenancy Illinois Statutory

**FROM**

**TO**

Printed by Recorder for use in  
Will County, Illinois

**Karen A. Stukel**  
**WILL COUNTY RECORDER**

Executive Centre  
58 East Clinton Street  
Joliet, Illinois 60432

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Fax: (815) 740-4697