Prepared By & Return To:	
Name:	_
Address:	_
 City:	
State: Zip Code:	
Parcel Control Number:	_
	Space Above: This Line for Recorder's Use

## QUIT CLAIM DEED

This quit claim deed, executed this	day of	, 20, by	Grantor(s)	
whose post office address is:				,
to Grantee(s):				, ,
whose post office address is:				

Witnesseth, that the said Grantor, for the sum of \$\_\_\_\_\_, and other good and valuable consideration paid by the Grantee, the receipt whereof is hereby acknowledged, does hereby remise, release, and quitclaim unto the said Grantee forever, all the right, title, interest, claim, and demand which the said Grantor has in and to the following described parcel of land, and all improvements and appurtenances thereto, in Palm Beach County Florida:

## (Legibly print, type, or stamp the full legal description in the space below)

In Witness Whereof, the said Grantor has signed and sealed these presents the day and year first written above.

Grantor Signature	Grantor Signature
Grantor Printed Name	Grantor Printed Name
Signed, sealed, and delivered in the p	presence of:
Witness #1 Signature	Witness #2 Signature
Witness #1 Printed Name	Witness #2 Printed Name
Witness #1 Address	Witness #2 Address
STATE OF FLORIDA COUNTY OF	
online notarization, this da	wledged before me by means of physical presence or ny of 20, by who is personally known to me
or produced	
	Signature of Notary Public
(SEAL)	Printed Name of Notary Public
	My Commission Expires: