

**SURVIVORSHIP QUIT-CLAIM DEED**

\_\_\_\_\_ name(s) and marital or organizational status of grantor(s)  
for valuable consideration paid, grant(s) and quit claim(s) all right, title and interest of grantor(s) to \_\_\_\_\_  
\_\_\_\_\_ and \_\_\_\_\_  
\_\_\_\_\_ for their joint lives, remainder to the survivor of them, whose tax mailing address is \_\_\_\_\_

the following described real property:

Situated in the State of Ohio, County of \_\_\_\_\_  
and \_\_\_\_\_ of \_\_\_\_\_

\*

Tax District and Parcel number: \_\_\_\_\_  
Street address of property: \_\_\_\_\_  
Prior Instrument Reference: \_\_\_\_\_

\_\_\_\_\_, spouse of the Grantor, releases all rights of dower therein.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signatures of Grantors:

\_\_\_\_\_

STATE OF OHIO, COUNTY OF:

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_ by \_\_\_\_\_  
Complete pursuant to ORC Section 147.55

\_\_\_\_\_  
Notary Public

This instrument prepared by: \_\_\_\_\_, Attorney at Law

After recording, return to: \_\_\_\_\_

\* Insert legal description of real property and interest therein.