

DOCUMENT NO.

AFFIDAVIT OF CORRECTION

THIS FORM IS INTENDED TO CORRECT SCRIVENERS ERRORS.

THIS FORM CANNOT BE USED FOR THE FOLLOWING PURPOSES WITHOUT THE NOTARIZED SIGNATURES OF THE GRANTOR/GRANTEE*

- Altering boundary lines
- Adding property
- Altering title/ownership
- Deleting property

AFFIANT, hereby swears or affirms that the attached document
Recorded on the _____ Day of _____, _____ (year)
in volume _____, _____, as document no.

And was recorded in the Register of Deeds of
County, State of WI, contained the following error
(if more space is needed, please attach an addendum):

RECORDING AREA
NAME AND RETURN ADDRESS

The correction is as follows (if more space is needed, please attach an addendum)

A complete original or copy of the original document must be attached.

Dated this _____ day of _____, _____

Affiant's Signature (type name below)

Grantor's Signature (type name below)

Grantee's Signature (type name below)

Grantor's Signature (type name below)

Grantee's Signature (type name below)

STATE OF WISCONSIN
COUNTY OF _____, SS.

Subscribed and sworn to (or affirmed) before me this _____ day of _____, _____

(type name below)

Notary Public, State of Wisconsin
My commission (expires) (is): _____

This instrument is drafted by _____