

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL DOCUMENT AND TAX STATEMENT TO:

NAME:
STREET
ADDRESS
CITY, STATE &
ZIP CODE

TITLE ORDER NO.

ESCROW NO.

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

GRANT DEED

APN:

The undersigned grantor(s) declare(s)

DOCUMENTARY TRANSFER TAX \$

computed on full value of property conveyed, or

computed on full value less liens and encumbrances remaining at time of sale.

Unincorporated Area City of _____

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, I (We)

hereby remise, release and grant to

the following described real property in the City of _____, County of _____
State of California, with the following legal description:

Date

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF _____

COUNTY OF _____

On _____ before me, _____
(Date) (Name and title of the officer)

personally appeared _____
(Name of person(s) signing)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature (Seal)

MAIL TAX STATEMENT AS DIRECTED ABOVE

IMPORTANT: If you have questions regarding the appropriateness of using this form or whether an alternative deed form should be selected, you should consult an attorney before completing or recording this document.