

**Prepared By and After Recording Return to:**

**Send Tax Statements to Grantee (Name and Address):**

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## QUITCLAIM DEED

TRA: \_\_\_\_\_

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 acknowledged, \_\_\_\_\_,  
AND \_\_\_\_\_, Husband and Wife, hereby remise, release and forever  
quitclaim to \_\_\_\_\_,  
\_\_\_\_\_, and \_\_\_\_\_, as joint tenants with the right  
of survivorship and not as tenants in common, the following described real property located in  
the City of \_\_\_\_\_, County of \_\_\_\_\_, California:

[Insert Legal Description or State "See Exhibit A attached hereto" and attach legal description as  
an Exhibit]

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Type or Print Name

State of California

County of \_\_\_\_\_

On \_\_\_\_\_ before me, \_\_\_\_\_ (here  
insert name and title of the officer), personally appeared \_\_\_\_\_

\_\_\_\_\_, 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)

State of California

County of \_\_\_\_\_

On \_\_\_\_\_ before me, \_\_\_\_\_ (here  
insert name and title of the officer), personally appeared \_\_\_\_\_

\_\_\_\_\_, 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)

Grantor(s) Name, Address and phone:	Grantee(s) Name, Address and Phone:
_____	_____
_____	_____
_____	_____
_____	_____