

RECORDING REQUESTED BY:

WHEN RECORDED MAIL THIS DEED
AND TAX STATEMENTS TO

NAME

ADDRESS

CITY
STATE & ZIP

GRANT DEED

ORDER NO. ESCROW NO. APN NO.

THE UNDERSIGNED GRANTOR(S) DECLARE(S) NO CONSIDERATION GIVEN,

DOCUMENTARY TRANSFER TAX is \$ _____ CITY TAX \$ _____

- computed on full value of property conveyed, or computed on full value less value of liens or encumbrances remaining at time of sale,
 Unincorporated area: City of _____, and

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

hereby GRANT(s) to

the following described real property in the County of _____, State of California:

Dated: _____

STATE OF CALIFORNIA }
COUNTY OF _____ } S.S.

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 _____