

RECORDING REQUESTED BY:

Order #:  
APN #:

WHEN RECORDED MAIL TO

SPACE ABOVE THIS LINE FOR RECORDERS USE

## Grant Deed

The undersigned grantor(s) declare(s):

Documentary transfer tax is

computed on full value of property conveyed, or

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

Unincorporated area:       City of

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

**hereby GRANT(S) to**

that property in

Mail Tax Statements to \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_

State of California

County of

On \_\_\_\_\_ before me,

\_\_\_\_\_, a Notary Public,

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 \_\_\_\_\_

Name \_\_\_\_\_

(typed or printed)

(Area reserved for official notarial seal)

**MAIL TAX STATEMENTS AS DIRECTED ABOVE**