RECORDING REQUESTED BY			
AND WHEN RECORDED MAIL TO: Name: Address: City & State: Zip:			
ASSESSORS PARCEL NO.	GRAN	SPACE ABOVE THIS LINE FO	OR RECORDER'S USE
The undersigned Grantor(s) declare(s) und Documentary transfer tax is \$ Computed on full value of property convert Computed on full value less value of lien Unincorporated area: City of FOR A VALUABLE CONSIDERATION, recent hereby GRANT(S) to	eyed, or is and encumbran	ces remaining at time of sale.	nd correct: , and
the following described real property in the Ci	ity of	, County of	, State of California:
Dated			
A notary public or other officer comple		OWLEDGMENT	dividual who signed
the document to which this certificate			
State of California County of		)	
On before	ore me,	(HERE INSERT NAME AND TITLE (	OF THE OFFICER)
who proved to me on the basis of satisfactory whose name(s) is/are subscribed to the withir to me that he/she/they executed the same in capacity(ies), and that by his/her/their signatu or the entity upon behalf of which the person( I certify under PENALTY OF PERJURY under that the foregoing paragraph is true and correct WITNESS my hand and official seal. Signature	n instrument and a his/her/their autho ure(s) on the instru (s) acted, executed r the laws of the S	acknowledged prized iment the person(s), d the instrument.	,
-		<b>_</b>	(SEAL)
Title Order No. MAIL TAX STATEMENTS TO:		Escrow, Loan, or Attorne	ey File No.
NAME		ADDRESS	CITY, STATE, ZIP