

RECORDING REQUESTED BY

WHEN RECORDED MAIL TO
AND MAIL TAX STATEMENTS TO

NAME

ADDRESS

CITY
STATE & ZIP

TITLE ORDER NO. _____ ESCROW OR LOAN NO. _____ APN NO. _____

QUITCLAIM DEED

THE UNDERSIGNED GRANTOR(s) DECLARE(s)
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 remise, release and forever quitclaim 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 _____

personally known to me (or 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.

WITNESS my hand and official seal.

Signature _____