Г	٦			
Name				
Street Address				
City &				
State L	J			
<del>-</del>			SPACE ABO	VE THIS LINE FOR RECORDER'S USE
Title Order #	The undersigned grantor(s) declare(s):  DOCUMENTARY TRANSFER TAX \$			
Escrow#	☐ Computed on the consideration or value of property conveyed; or			
APN#	<ul> <li>□ Computed on the consideration or value less liens or encumbrances remaining at time of sale.</li> <li>□ Unincorporated area</li> <li>□ City of</li> </ul>			
		QUITCLA		
				pany when a person relinquishes any interest describe the property involved and record the
I/We,				
quitclaim to				
the real property in the City of				,
				, State of California,
referred to as				
☐ See attached Signature Page Addend		<del> </del>		
Date: ,20				
Date,20	(Print name)			(Signature)
	(Print name)			(Signature)
A notary public or other officer completing attached, and not the truthfulness, accur	ng this certificate ver		entity of the indi	vidual who signed the document to which this certificate is
STATE OF CALIFORNIA				
COUNTY OF	before me,			
personally appeared who proved to me on the basis of satisfar to me that he/she/they executed the sam	ctory evidence to be the in his/her/their aut	the person(s) withorized capacit	vhose name(s) is y(ies), and that b	(Name and title of officer) s/are subscribed to the within instrument and acknowledged by his/her/their signature(s) on the instrument the person(s),
or the entity upon behalf of which the per	son(s) acted, execut	ted the instrume		DENALTY OF DED II IDV under the laws of the State of
			•	PENALTY OF PERJURY under the laws of the State of the foregoing paragraph is true and correct.
			WITNESS my	hand and official seal.
			Signature:	
(This area for official notarial seal)			- 5	(Signature of notary public)

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

**FORM 405** 

MAIL TAX STATEMENTS AS DIRECTED ABOVE