Recording Requested By:

When recorded mail document to:

NAME

ADDRESS

CITY

STATE & ZIP

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| JOINT TENANCY GRANT DEED   |
|--|
| Title Order No. Escrow No. APN No.   |
| THE UNDERSIGNED GRANTOR(S) DECLARE(S)  DOCUMENTARY TRANSFER TAX is \$  |
| CITY TAX \$  |
| <ul> <li>□ computed on full value of property conveyed, or</li> <li>□ computed on full value of items or encumbrances remaining at time of sale,</li> <li>□ Unincorporated area</li> <li>□ City of</li></ul> |
| hereby GRANT(s) to   |
| , as Joint Tenants   |
| The following described real property in the City of County  |
| of, State of California:   |
| Dated:  STATE OF CALIFORNIA  |
| COUNTY OF  |
| On   |
| I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoin paragraph is true and correct.  |
| WITNESS my hand and official seal.   |
| Signature  |