

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:

Name
Street
Address
City &
State
Zip

Title Order No. Escrow No.

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Interspousal Grant Deed

THE UNDERSIGNED GRANTOR DECLARES

The Documentary transfer tax is (none).

There is no consideration for this transfer. This is an interspousal transfer under Revenue & Taxation Code § 63.

Parcel No. _____

Grantor,

Grantee,

hereby GRANT(S) to
the following described real property in the

County of _____, state of California

THE GRANTOR IS EXECUTING THIS INSTRUMENT FOR THE PURPOSE OF RELINQUISHING ALL OF GRANTORS RIGHTS, TITLE AND INTEREST INCLUDING, BUT NOT LIMITED TO, ANY COMMUNITY PROPERTY INTEREST IN AND TO THE LAND DESCRIBED HEREIN AND PLACE TITLE IN THE NAME OF THE GRANTEE, AS HIS/HER SEPARATE PROPERTY.

Dated _____

STATE OF CALIFORNIA
COUNTY OF _____

On _____ before me, _____

(here insert name and title of the officer)

, 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 _____

(This area for official notarial seal)

MAIL TAX STATEMENTS TO PARTY SHOWN ON FOLLOWING LINE; IF NO PARTY SHOWN, MAIL AS DIRECTED ABOVE

Name

Street Address

City & State