AND WHEN RECORDED MAIL DOCUMENT AND

TAX STATEMENT TO:

RECORDING REQUESTED BY

NAME

STREET ADDRESS

CITY, STATE & ZIP CODE

TITLE ORDER NO.

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

REVOCABLE TRANSFER ON DEATH (TOD) DEED

(California Probate Code Section 5642)

ASSESSOR'S PARCEL NUMBER:

This document is exempt from documentary transfer tax under Revenue & Taxation Code 11930. This document is exempt from preliminary change of ownership report under Revenue & Taxation Code 480.3.

ESCROW NO

IMPORTANT NOTICE: THIS DEED MUST BE RECORDED ON OR BEFORE 60 DAYS AFTER THE DATE IT IS NOTARIZED. Use this deed to transfer the residential property described below directly to your named beneficiaries when you die. YOU SHOULD CAREFULLY READ ALL OF THE INFORMATION ON THE OTHER PAGES OF THIS FORM. You may wish to consult an attorney before using this deed. It may have results that you do not want. Provide only the information asked for in the form. DO NOT INSERT ANY OTHER INFORMATION OR INSTRUCTIONS. This form MUST be RECORDED on or before 60 days after the date it is notarized or it will not be effective.

PROPERTY DESCRIPTION Print the legal description of the residential property affected by this deed:

BENEFICIARY(IES) Name the person(s) or entity(ies) who will receive the described property on your death. IF YOU ARE NAMING A PERSON, state the person's FULL NAME (DO NOT use general terms like "my children"). You may also wish to state the RELATIONSHIP that the person has to you (spouse, son, daughter, friend, etc.), but this is not required. IF YOU ARE NAMING A TRUST, state the full name of the trust, the name of the trustee(s), and the date shown on the signature page of the trust. IF YOU ARE NAMING A PRIVATE OR PUBLIC ENTITY, state the name of the entity as precisely as you can.

TRANSFER ON DEATH

Date

I transfer all of my interest in the described property to the named beneficiary(ies) on my death. I may revoke this deed. When recorded, this deed revokes any TOD deed that I made before signing this deed. Sign and print your name below (your name should exactly match the name shown on your title documents) NOTE: This deed only transfers MY ownership share of the property. The deed does NOT transfer the share of any co-owner of the property. Any co-owner who wants to name a TOD beneficiary must execute and RECORD a SEPARATE deed.

Typed or Printed Name of Grantor

Signature of Grantor

WITNESSES To be valid, this deed must be signed by two persons, both present at the same time, who witness your signing of the deed or your acknowledgment that is your deed. The signatures of the witnesses do not need to be acknowledged by a notary public.

Printed Name Witness #1	Signature Witness #1		
Printed Name Witness #2	Signature Witness #2	Signature Witness #2	
	ompleting this certificate verifies only the ic , and not the truthfulness, accuracy, or vali	dentity of the individual who signed the document to dity of that document.	
STATE OF			
COUNTY OF			
On(Date)		Name and title of the officer)	
personally appeared	(Name of person signing)	, who proved to me on the basis of	
satisfactory evidence to be the that they executed the same in their behalf of which the person(s) acted, e	person(s) whose name(s) is/are subscrib authorized capacity(ies), and that by their si- xecuted the instrument.	bed to the within instrument and acknowledged to me gnature(s) on the instrument the person(s), or the entity upon	
I certify under PENALTY OF PERJUR	Y under the laws of the State of California that	the foregoing paragraph is true and correct.	
WITNESS my hand and official seal.			

Signature