Recording requested by (name):	
When recorded mail to and mail tax statements to:	_
	Recorder's Use Only
	ABLE TRANSFER ON DEATH DEED robate Code Section 5600)
This deed revocation is exempt from documentary trar exempt from preliminary change of ownership report u	nsfer tax under Rev. & Tax. Code §11930. This deed revocation is under Rev. & Tax. Code § 480.3.
Assessor's Parcel No.:	
IMPORTANT NOTICE: THIS FOR	M MUST BE RECORDED TO BE EFFECTIVE
effective. This revocation form only affects a trans made by a co-owner of your property is not affect	or before 60 days after the date it is notarized or it will not be sfer on death deed that YOU made. A transfer on death deed ted by this revocation form. A co-owner who wants to revoke a plete and RECORD a SEPARATE revocation form.
PROPE	RTY DESCRIPTION
Print the legal description of the property affected	I by this revocation:
	REVOCATION
	property that I executed before executing this form.
•	ATURE AND DATE
	ald exactly match the name shown on your title documents):
Date:	
	(Signature of declarant)
	(Typed or written name of declarant)

WITNESSES

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

Witness #1	Witness #2
Date:	Date:
Print and sign your name:	Print and sign your name:
	<u> </u>
	<u> </u>

ACKNOWLEDGMENT

State of California County of))	
	before me, (insert name and title of the officer)	fficer)
personally appeared		
who proved to me on the is/are subscribed to the wathe same in his/her/their	asis of satisfactory evidence to be the person(s) whose hin instrument and acknowledged to me that he/she/the athorized capacity(ies), and that by his/her/their signature the entity upon behalf of which the person(s) acted, expression is the continuous acted.	ne/they executed gnature(s) on the
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