

Recording
Requested by:

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

NAME: **SAMIR SAYEGH and LINDA JANE SAYEGH**
STREET
ADDRESS: **AND NABIL SAYEGH AND FAHAD SAYEGH**
2095 N. Lake Avenue
CITY
STATE
ZIP: **Altadena, Ca. 91001**

THIS SPACE FOR RECORDING USE ONLY

Escrow No. **952922-P**

Title Order No. **9505438-34**

Assessor's Parcel No. _____

Grant Deed

THIS FORM FURNISHED BY COMPUTER DATA CONTROL



The undersigned declares that the DOCUMENTARY TRANSFER TAX IS **\$170.50**

CITY TAX IS **\$0.00**

- Computed on the full value of the interest or property conveyed, or is
 Computed on the full value less the value of liens and encumbrances remaining thereon at the time of sale, OR
 transfer is exempt from tax for the following reason: **(none)**

Unincorporated Area: City of _____, and

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

DALE A. SMITH, A SINGLE MAN

hereby GRANT(S) to

SAMIR SAYEGH, AND LINDA JANE SAYEGH, husband and wife as tenants in common as to an undivided 1/3 interest and **NABIL SAYEGH**, a single man as to an undivided 1/3 interest, and **FAHAD SAYEGH**, a single man as to an undivided 1/3 interest, all as tenants in common all that real property situated in the UNINCORPORATED AREA OF ALTADENA COUNTY OF Los Angeles, STATE OF CALIFORNIA, described as:

Lot 6 of Tract 6162 as per map recorded in Book 65 page 19 of Maps in the office of the Recorder of said County.

commonly known as: **877 AND 879 ALAMEDA ST., ALTADENA, CA 91001**

Street Address

City and State

Zip Code

Dated **Feb. 16, 1995**

STATE OF CALIFORNIA

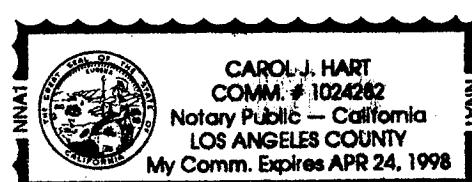
COUNTY OF **LOS ANGELES** } ss.

On **3/1/95** before me, **Carol J. Hart**
a notary public, personally appeared **Dale A. Smith**

Dale A. Smith

DALE A. SMITH

(This area for official notarial seal)



personally known to me (or 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 entity upon behalf of which the person(s) acted, executed the instrument.

Signature of notary **Carol J. Hart**

Mail Tax
Statements to: _____

Street Address

MAIL TAX STATEMENTS AS DIRECTED ABOVE

City and State

Zip Code

95 397709