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VESTING AMENDMENT/ WORKSHEET

Escrow No.: _____

RE: _____ 2

NOTE: Please indicate your choice by checking the appropriate selection. Please fill in the blanks completely and print names exactly as they should appear on all documents and as you will be signing your name.

PURSUANT TO THE ABOVE REFERENCED ESCROW, ESCROW HOLDER IS INSTRUCTED TO REFLECT MY NAME AND VESTING AS FOLLOWS:

1. **YOUR NAME(S)** (Print Name(S) Exactly as they should appear on documents)

YOU WILL NEED A PHOTO IDENTIFICATION IN THIS NAME FOR NOTARY PURPOSES

2.

- | | |
|---|---|
| <input type="checkbox"/> Husband and Wife | <input type="checkbox"/> As Community Property |
| <input type="checkbox"/> As Joint Tenants | <input type="checkbox"/> Registered Domestic Partners |
| <input type="checkbox"/> As Community Property with Right of Survivorship | <input type="checkbox"/> A Single Woman (never married) |
| <input type="checkbox"/> A Single Man (never married) | <input type="checkbox"/> A Widower (wife is deceased) |
| <input type="checkbox"/> A Widow (husband is deceased) | <input type="checkbox"/> An Unmarried woman (divorced) |
| <input type="checkbox"/> An Unmarried Man (divorced) | |
| <input type="checkbox"/> OTHER: FOR ANY VESTING NOT SHOWN ABOVE, PLEASE CONTACT ESCROW HOLDER FOR FURTHER INSTRUCTIONS | |

3. **MARRIED MAN** - AS HIS SOLE AND SEPARATE PROPERTY
 MARRIED WOMAN - AS HER SOLE AND SEPARATE PROPERTY

(Print Name Exactly as it should appear on documents)

PLEASE INDICATE THE FULL NAME OF SPOUSE FOR PREPARATION OF A QUIT CLAIM DEED.

HOW YOU HOLD TITLE TO YOUR PROPERTY CAN HAVE SERIOUS TAX CONSEQUENCES. IT IS STRONGLY RECOMMENDED THAT YOU SEEK TAX AND/OR LEGAL COUNSEL WHEN COMPLETING THIS FORM.

SIGNATURE OF BUYERS

Date: _____
