



Recording Requested by:
First American Title Insurance Company

When recorded mail to:
Eliud Santiago and Camille A. Santiago
747 West Torino Place
Casa Grande, AZ 85222

DATE/TIME: 10/29/07 1317
FEE: \$16.00
PAGES: 3
FEE NUMBER: 2007-120283

SPECIAL WARRANTY DEED

(Trust - Grantee's Acceptance Attached)

File No. **225-4932151**.(drl)

Trust No. **8308**

For the consideration of TEN AND NO/100 DOLLARS, and other valuable considerations, **First American Title Insurance Company, a California Corporation**, as TRUSTEE, under Trust No. **8308**, and not personally the GRANTOR herein, does hereby convey to

Eliud Santiago and Camille A. Santiago, husband and wife, the GRANTEE,

The following described real property situate in **Pinal County, Arizona** with the title being conveyed to the grantee as set forth in the attached acceptance by the grantee:

LOT 87, OF FINAL PLAT FOR LOS PORTALES, ACCORDING TO THE PLAT OF RECORD IN THE OFFICE OF THE COUNTY RECORDER OF PINAL COUNTY, ARIZONA, RECORDED IN CABINET F, SLIDE 162.

Beneficiary under Trust No. 8308 is: Brown Family Communities, 2164 E. Broadway #300, Tempe, AZ 85282

Subject To: Existing taxes, assessments, covenants, conditions, restrictions, rights of way and easements of record.

And the GRANTOR binds itself and its successors to warrant the title as against its acts and none other, subject to the matters set forth.

DATED: August 21, 2007

SEE ACCEPTANCE ATTACHED HERETO
AND BY REFERENCE MADE A PART HEREOF.

**First American Title Insurance Company, a
California Corporation,**
as TRUSTEE, and not personally,

By: Charlotte A. Knoll
Charlotte A. Knoll, Sr. Trust Officer

STATE OF ARIZONA)
County of Maricopa)ss.

On 9-18-2007, before me, the undersigned Notary Public, personally appeared Charlotte A. Knoll, Sr. Trust Officer, 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 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.

WITNESS my hand and official seal.

My Commission Expires:

Elaine M. Gill
Notary Public



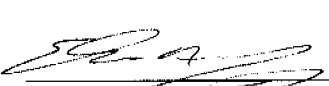
ACCEPTANCE OF COMMUNITY PROPERTY WITH RIGHT OF SURVIVORSHIP

This Acceptance is to be attached to: Warranty Deed dated **08/21/2007** by and between **First American Title Insurance Company, a California Corporation** and **Eliud Santiago and Camille A. Santiago.**

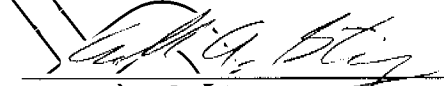
That each of the undersigned individually and jointly as such Grantees hereby declare that it is their intention to accept this conveyance as community property with right of survivorship and not as joint tenants with right of survivorship and not as tenants in common, and to acquire any interest in said real property under said deed as community property with right of survivorship, and not as joint tenants with right of survivorship and not as tenants in common.

That by the execution and delivery to the Escrow Agent of this "Acceptance of Community Property with Right of Survivorship" the undersigned intend to evidence their acceptance of said deed as community property with right of survivorship, and hereby direct and authorize the Escrow Agent to attach this "Acceptance of Community Property with Right of Survivorship" to such deed upon its execution and delivery and to record this "Acceptance of Community Property with Right of Survivorship" together with such deed.

Date: **08/21/2007**



Eliud Santiago



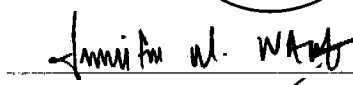
Camille A. Santiago

STATE OF Arizona)
County of MARICOPA)ss.

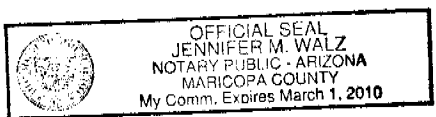
On 10/25/07, before me, the undersigned Notary Public, personally appeared **Eliud Santiago and Camille A. Santiago, husband and wife**, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged 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 the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

My Commission Expires: 3/1/10



Notary Public



AFFIDAVIT OF PROPERTY VALUE

f. ASSESSOR'S PARCEL NUMBER(S) (primary parcel number):
 Primary Parcel: 504-05-18705

BOOK MAP PARCEL SPLIT LETTER
 Does this sale include any parcels that are being split / divided?
 Check one: Yes No

How many parcels, other than the Primary Parcel, are included in this sale?
 Please list the additional parcels below (no more than four):
 (1) _____ (3) _____
 (2) _____ (4) _____

2. SELLER'S NAME AND ADDRESS:
First American Title Insurance Co., Trust No. 8308
4801 East Washington
Phoenix, AZ 85032

3. (a) BUYER'S NAME AND ADDRESS:
Eliud A. Santiago and Camille A. Santiago
747 West Torino Place
Casa Grande, AZ 85222

(b) Are the Buyer and Seller related: Yes No
 If yes, state relationship: _____

4. ADDRESS OF PROPERTY:
747 West Torino Place
Casa Grande, AZ 85222

5. MAIL TAX BILL TO:
Eliud A. Santiago and Camille A. Santiago
747 West Torino Place
Casa Grande, AZ 85222

6. PROPERTY TYPE (for Primary Parcel): **NOTE: Check Only One Box**

a. <input type="checkbox"/> Vacant Land	f. <input type="checkbox"/> Commercial or Industrial Use
b. <input checked="" type="checkbox"/> Single Family Residence	g. <input type="checkbox"/> Agricultural
c. <input type="checkbox"/> Condo or Townhouse	h. <input type="checkbox"/> Mobile or Manufactured Home
d. <input type="checkbox"/> 2-4 Plex	i. <input type="checkbox"/> Other Use, Specify: _____
e. <input type="checkbox"/> Apartment Building	

7. RESIDENTIAL BUYER'S USE: If you checked **b, c, d,** or **h** in Item 6 above, please check **one** of the following:
 To be occupied by owner or family member. **To be rented to someone other than "family member."**

See reverse side for definition of a "family member."

8. NUMBER OF UNITS: _____
 For Apartment Properties, Motels, Hotels, Mobile Home Parks, RV Parks, Mini-Storage Properties, etc.

9. **FOR OFFICIAL USE ONLY: Buyer and Seller leave blank**

COUNTY OF RECORDATION: PINAL
 FEE NO: 2007-120283
 RECORD DATE: 10/29/07

ASSESSOR'S USE ONLY
 Verify Primary Parcel in Item 1: _____
 Use Code: _____ Full Cash Value: \$ _____

10. TYPE OF DEED OR INSTRUMENT (Check Only One Box):

a. <input type="checkbox"/> Warranty Deed	d. <input type="checkbox"/> Contract or Agreement
b. <input checked="" type="checkbox"/> Special Warranty Deed	e. <input type="checkbox"/> Quit Claim Deed
c. <input type="checkbox"/> Joint Tenancy Deed	f. <input type="checkbox"/> Other

11. SALE PRICE: 212,285.00 00

12. DATE OF SALE (Numeric Digits): August 21, 2007
 Month Year
 (For example: 03 / 05 for March 2005)

13. DOWN PAYMENT: \$ 0 00

14. METHOD OF FINANCING:

a. <input type="checkbox"/> Cash (100% of Sale Price)	e. <input checked="" type="checkbox"/> New loan(s) from Financial institution:
b. <input checked="" type="checkbox"/> Exchange or trade	(1) <input type="checkbox"/> Conventional
c. <input type="checkbox"/> Assumption of existing loan(s)	(2) <input checked="" type="checkbox"/> VA
d. <input checked="" type="checkbox"/> Seller Loan (Carryback)	(3) <input type="checkbox"/> FHA
	f. <input type="checkbox"/> Other financing; Specify: _____

15. PERSONAL PROPERTY (see reverse side for definition):
 (a) Did the Sale Price in Item #11 include Personal Property that Impacted the Sale Price by 5% or more? Yes _____ No
 (b) If Yes, provide the dollar amount of the Personal Property:
 \$ 00 AND
 briefly describe the Personal Property: _____

16. PARTIAL INTEREST: If only a partial ownership interest is being sold, briefly describe the partial interest: _____

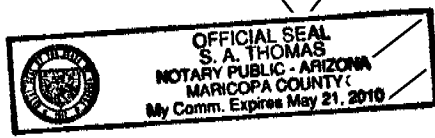
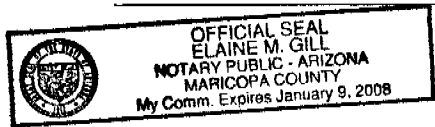
17. PARTY COMPLETING AFFIDAVIT (Name, Address, Phone):
First American Title Insurance Company
2164 East Broadway Road, Suite 260
Tempe, AZ 85282-1785
1225-4932151 (drl) / Phone (480)894-9602

18. LEGAL DESCRIPTION (attach copy if necessary):
LOT 87, OF FINAL PLAT FOR LOS PORTALES, ACCORDING TO THE PLAT OF RECORD IN THE OFFICE OF THE COUNTY RECORDER OF PINAL COUNTY, ARIZONA, RECORDED IN CABINET F, SLIDE 162.

THE UNDERSIGNED BEING DULY SWORN, ON OATH, SAYS THAT THE FOREGOING INFORMATION IS A TRUE AND CORRECT STATEMENT OF THE FACTS PERTAINING TO THE TRANSFER OF THE ABOVE DESCRIBED PROPERTY.

Charlotte A. Brull, Sr. Tr. Officer
 Signature of Seller/Agent
 State of AZ, County of Maricopa
 Subscribed and sworn to before me on this 18th day of Sept. 2007
 Notary Public Elaine M. Gill
 Notary Expiration Date _____

D. Thomas
 Signature of Buyer/Agent
 State of AZ, County of Maricopa
 Subscribed and sworn to before me on this 24th day of October 2007
 Notary Public S. A. Thomas
 Notary Expiration _____



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