



Starcrest Escrow, Inc.

10833 Valley View Street, Suite 220, Cypress, CA 90630

Tel: (714) 622-1570 • Fax: (714) 622-1577

DATE:

ESCROW NO.:

THIRD PARTY DEPOSIT OF FUNDS IN ESCROW

I hand you herewith my check # _____, dated _____, in the amount of \$ _____, which you are authorized and instructed to deposit to the account and use of _____ without consideration to me in your Escrow No. _____. If for any reason the escrow mentioned above is not consummated, you are not to be concerned with my consent to the disposition of said funds.

(Signature)

(Printed Name)

(Signature)

(Printed Name)

I hereby accept these funds being deposited into my account.

Buyer(s)
