CONFIDENTIAL INFORMATION STATEMENT

Proper completion of this form will help protect you by enabling the title company to eliminate the problems that might arise through similarity of your name with the name of another person against whom there may be judgments, tax liens, or other matters affecting property ownership.

COMPLE	ETION OF THIS FORM WILL EXPEI	DITE YOUR ORDER AND WILL	HELP PROTECT YOU	
Name (1			Name (2nd Part	y)
First Middle	Last	First	Middle	Last
0 ((6))	D' the L	D ((B) "	500	
Date of Birth Sex: M/F	Birthplace	Date of Birth Sex: M/F	Birthplace	
have lived in Social Security No.		I have lived in		
California since		California since		
Home Phone	Work Phone	Home Phone		Work Phone
Driver's license #		Driver's license #		
DE DADTIEO 4 - red 0 / / Married /) Demostic Destroye Married or		Maidan Na	
RE PARTIES 1 and 2 () Married (Maiden Nai	ne
	RESIDENCE(S) DU	JRING PRECEDING 10 YEARS		
UMBER AND STREET	CITY		FROM	ТО
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UMBER AND STREET	CITY		FD 0::	
UMBER AND STREET	CITY		FROM	TO
		eded, use reverse side of form)		
it Party_		.,		
RESENT OCCUPATION	FIRM NAME	ADDRESS	No	D. YEARS
DIOD OCCUPATION	FIDM NAME	ADDRESS	N/	NEADS
RIOR OCCUPATION	FIRM NAME	ADDRESS	N	D. YEARS
nd Party RESENT OCCUPATION	FIRM NAME	ADDRESS	No	D. YEARS
RIOR OCCUPATION		ADDRESS eded, use reverse side of form)	No	D. YEARS
no former marriages/Domestic Partnerships		RIAGE(S)/PARTNERSHIPS		
at Party - Name of former Spouse/Domestic				
	erminationWhe	en Where		
	·			
nd Party - Name of former Spouse/Domestic				
eceasedDivorced/T	erminationWhe	enWhere eded, use reverse side of form)		
HE STREET ADDRESS of the property in th	is transaction is:			
	ESIDENCE () MULTIPLE RESIDE			
OCCUPIED BY: () OWNER		() TENANTS		
` '	UNDS TO BE USED FOR CONSTRUCT	• •		
			THE LACT CLY MONTHICS	
AS ANY CONSTRUCTION OR IMPROVEM) YES () NO	EN 19 REEN MADE TO THE SKOPEKTY	T IN THIS TRANSACTION DURING I	TE LAST SIX MONTHS?	
SIGN	IATURE	SIGNATUR	RE	
mail				
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DATI	E	DATE		