**Stewart Title of California, Inc.**

**STATEMENT OF INFORMATION**

**CONFIDENTIAL**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THE STREET ADDRESS of the property in this transaction is: (**IF NONE LEAVE BLANK)

|  |  |  |  |
| --- | --- | --- | --- |
| ADDRESS |  |  CITY  |  |

IMPROVEMENTS: [ ]  SINGLE RESIDENCE [ ]  MULTIPLE RESIDENCE [ ]  COMMERCIAL

OCCUPIED BY: [ ]  OWNER [ ]  TENANTS

CONSTRUCTION OR IMPROVEMENTS WITHIN THE LAST 6 MONTHS? [ ]  YES [ ]  NO

|  |  |
| --- | --- |
| IF YES, STATE NATURE WORK DONE |  |

|  |  |
| --- | --- |
| **PARTY 1** | **PARTY 2** |

|  |  |  |
| --- | --- | --- |
| FIRST MIDDLE LAST |  | FIRST MIDDLE LAST |
|  |  |  |
|  |  |  |
| FORMER LAST NAME(S), IF ANY |  | FORMER LAST NAME(S), IF ANY |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| BIRTHPLACE |  | BIRTH DATE |  | BIRTHPLACE |  | BIRTH DATE |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Social Security No. |  | DRIVER'S LICENSE NO. |  | Social Security No. |  | DRIVER'S LICENSE NO. |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Home |  | Cell |  | Home |  | Cell |

 [ ]  AM SINGLE [ ]  AM MARRIED [ ]  HAVE A DOMESTIC PARTNER [ ]  AM SINGLE [ ]  AM MARRIED [ ]  HAVE A DOMESTIC PARTNER

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date of Marriage or Partnership |  |  | Date of Marriage or Partnership |  |

|  |  |  |
| --- | --- | --- |
| NAME OF CURRENT SPOUSE OR DOM. PARTNER (if other than Party 2): |  | NAME OF CURRENT SPOUSE OR DOM. PARTNER (if other than Party 1): |
|  |  |  |
|  |  |  |
|  |  |  |
| NAME OF FORMER SPOUSE/DOM. PARTNER: (IF NONE, WRITE “NONE”): |  | NAME OF FORMER SPOUSE/DOM. PARTNER: (IF NONE, WRITE “NONE”): |
|  |  |  |
|  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dissolutions pending Required to make child support payments?Required to make Family support payments? | Yes No (circle one)Yes No (circle one)Yes No (circle one) |  | Dissolutions pending Required to make child support payments?Required to make Family support payments? | Yes No (circle one)Yes No (circle one)Yes No (circle one) |
| If paying former spouse directly, please provide address: |  | If paying former spouse directly, please provide address: |

|  |  |  |
| --- | --- | --- |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |

**OCCUPATIONS FOR LAST 10 YEARS (attach additional 10 year information, if applicable)**

|  |  |
| --- | --- |
| Party 1: |  |
|  | Occupation | Firm Name | Street and City | No. Years |
| Party 2: |  |
|  | Occupation | Firm Name | Street and City | No. Years |

**RESIDENCES FOR LAST 10 YEARS (attach additional 10 year information, if applicable)**

|  |  |
| --- | --- |
| Party 1: |  |
|  | Street No. | Street Name | City | No. Years |
| Party 2: |  |
|  | Street No. | Street Name | City | No. Years |

**Email Address**

|  |  |
| --- | --- |
| If you would like us to contact you by email, please provide your email address |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Home Phone: |  |  Business Phone: |  |  Cell Phone: |  |

**The undersigned declare, under penalty of perjury, that foregoing is true and correct.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Signature:** |  |  **Date:** |  |  | **Signature:** |  |  **Date:** |  |