## **Stewart Title of California, Inc. STATEMENT OF INFORMATION**

## **CONFIDENTIAL**

THE STREET A	DDRESS of th	e property in this	transaction is:	(IF NONE LEAVE B	BLANK)		
ADDRESS				CITY			
OCCUPIED BY: CONSTRUCTION	☐ OWNER ☐ OR IMPROVEM	ESIDENCE	LAST 6 MONTHS	? □ YES □ N			
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  AM SINGLE AM MARRIED		Cell  HAVE A DOMESTIC PARTNER		Home Cell  AM SINGLE AM MARRIED HAV		Cell  HAVE A DOMESTIC PARTNER	
Date of Marriage or Partnership				Date of Marriage or Partnership			
NAME OF <u>CURRENT</u> SPOUSE OR DOM. PARTNER (if other than Party 2):				NAME OF <u>CURRENT</u> SPOUSE OR DOM. PARTNER (if other than Party 1):			
NAME OF <u>FORMER</u>	SPOUSE/DOM. PA	ARTNER: (IF NONE, W	RITE "NONE"):	NAME OF <u>FORM</u>	<u>ER</u> SPOUSE/DOM. PA	RTNER: (IF NONE, WRITE "NONE"):	
Dissolutions pending Yes No (circle one) Required to make child support payments? Yes No (circle one) Required to make Family support payments? Yes No (circle one) If paying former spouse directly, please provide address:				Dissolutions pending Yes No (circle one) Required to make child support payments? Yes No (circle one) Required to make Family support payments? Yes No (circle one) If paying former spouse directly, please provide address:			
	OCCUPATI	ONS FOR LAST	10 YEARS (atta	ch additional 10 y	ear information,	if applicable)	
Party 1:							
Occupation Party 2:			Firm Name Street and City		treet and City	No. Years	
Occupation			Firm Name	m Name Street and C		No. Years	
	RESIDEN	CES FOR LAST 1	0 YEARS (attac	h additional 10 ye	ear information, i	f applicable)	
Party 1:			•	-	·		
	Street No.		Street Name		City	No. Years	
Party 2:	Street No.		Street Name		City	No. Years	
			Emai	l Address			
If you would like u	s to contact you b	y email, please prov	vide your email add	Iress			
Home Phone: Business Phone:			Cell Phone:				
		penalty of perjury,					
_		Date:				Date:	

Order No.: \_\_\_\_\_ - Statement of Information CA Rev. 4/09