

# CONFIDENTIAL INFORMATION STATEMENT



Proper completion of this form will help protect you by enabling the title company to eliminate title 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.

Please Print

Your \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(FIRST NAME) (FULL MIDDLE NAME - IF NONE, INDICATE) (LAST NAME)

Birthplace \_\_\_\_\_ Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email \_\_\_\_\_

I have lived in California since \_\_\_\_\_ Social Security No. \_\_\_\_\_

Full Name of  
 { Wife \_\_\_\_\_  
 Husband (FIRST NAME) (FULL MIDDLE NAME - IF NONE, INDICATE) (LAST NAME)  
 Domestic Partner

She } has lived in California since \_\_\_\_\_ Her } Social Security No. \_\_\_\_\_  
 He } \_\_\_\_\_ His } \_\_\_\_\_

Her } Birthplace \_\_\_\_\_ Her } Date of Birth \_\_\_\_\_  
 His } \_\_\_\_\_ His } \_\_\_\_\_

Date of marriage or domestic partnership \_\_\_\_\_ at \_\_\_\_\_ Wife's maiden name \_\_\_\_\_  
(Date) (City & State)

## RESIDENCE DURING PRECEDING 10 YEARS

NUMBER AND STREET	CITY	FROM (DATE) TO (DATE)

(If more space is needed, use reverse side of form)

## OCCUPATION(S)

Your	OCCUPATION	FIRM NAME	STREET AND CITY	NO. YEARS
<small>(Show current occupation first)</small>				
Spouse or Domestic Partner's	OCCUPATION	FIRM NAME	STREET AND CITY	NO. YEARS
<small>(Show current occupation first)</small>				

(If more space is needed, use reverse side of form)

## FORMER MARRIAGE(S)

If no former marriages or domestic partnerships, write "None" \_\_\_\_\_

Name of former domestic partner \_\_\_\_\_

Deceased \_\_\_\_\_ Divorced \_\_\_\_\_ When \_\_\_\_\_ Where \_\_\_\_\_

Name of former Spouse \_\_\_\_\_

Deceased \_\_\_\_\_ Divorced \_\_\_\_\_ When \_\_\_\_\_ Where \_\_\_\_\_

Names of any children \_\_\_\_\_  
(If more space is needed, use reverse side of form)

The Street Address of the Property in this transaction is \_\_\_\_\_  
(LEAVE BLANK IF NONE)

Date \_\_\_\_\_ SIGNATURE \_\_\_\_\_

(IF MARRIED, BOTH HUSBAND AND WIFE SHOULD SIGN) SIGNATURE \_\_\_\_\_