



"WHERE THE CUSTOMER IS OUR FIRST PRIORITY"

Statement of Information

(For confidential use by Fincanical Title in searching the records in connection with the file number shown below.)

Property Address:
Escrow No.:
Order No.:

In order to expedite the completion of your transaction we are requesting that you complete the following "Statement of Information" form. We are not unnecessarily interested in your personal affairs, however, we have been asked to insure the title to real property in which you are interested and that requires a title search.

In searching your title we may encounter judgments, bankruptcies, divorces and/or income tax liens against persons with the same or similar names to yours. Such matters cloud the title to your property unless eliminated. The information you provide, and your spouse if you are married, can promptly eliminate all matters not directly affecting you or the property being searched, avoid any delay in your transaction and provide you with the most efficient service possible.

Thank you for your cooperation in furnishing us with the necessary information and please be assured that your information is confidential and used only for the purpose which we have stated.

Name: First Middle - if none, indicate Last US Residence since Year

Have you ever been known by any other name? No Yes If yes, indicate name

Social Security No. Drivers License No.

Date of Birth Location of Birth

Spouse or Domestic Partner's Name: First Middle - if none, indicate Last US Residence since Year

Social Security No. Drivers License No.

Date of Birth Location of Birth

Have you ever been known by any other name? No Yes If yes, indicate name

If married, or in a domestic partnership, Date at City and State

RESIDENCES LAST 10 YEARS (list most recent first)

Number and Street City, State, Zip Code From/To (Date)

Number and Street City, State, Zip Code From/To (Date)

Number and Street City, State, Zip Code From/To (Date)

(attach additional page, if necessary)

OCCUPATIONS

Occupation Co. Name Address, City, State, Zip No. Yr's/Mo's