



LandAmerica[®]

Commercial Services

STATEMENT OF INFORMATION

CONFIDENTIAL - TO BE USED ONLY IN CONNECTION WITH ORDER NO: _____

NOTE: THIS FORM IS NEEDED IN ORDER TO ELIMINATE JUDGMENTS AND LIENS AGAINST PEOPLE WITH SIMILAR NAMES

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
- ANY 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 NUMBER _____		DRIVER'S LICENSE NO. _____	SOCIAL SECURITY NUMBER _____		DRIVER'S LICENSE NO. _____
I <input type="checkbox"/> AM SINGLE <input type="checkbox"/> AM MARRIED <input type="checkbox"/> HAVE A DOMESTIC PARTNER			I <input type="checkbox"/> AM SINGLE <input type="checkbox"/> AM MARRIED <input type="checkbox"/> HAVE A DOMESTIC PARTNER		
NAME OF <u>CURRENT</u> SPOUSE/DOM. PARTNER (if other than Party 2): _____			NAME OF <u>CURRENT</u> SPOUSE/DOM. PARTNER (if other than Party 1): _____		
NAME OF <u>FORMER</u> SPOUSE/DOM. PARTNER: (IF NONE, WRITE "NONE"): _____			NAME OF <u>FORMER</u> SPOUSE/DOM. PARTNER: (IF NONE, WRITE "NONE"): _____		

MARRIAGE OR DOMESTIC PARTNERSHIP BETWEEN PARTIES 1 AND 2

ARE PARTIES 1 & 2: MARRIED? _____ DOMESTIC PARTNERS? _____ DATE OF MARRIAGE/DOM. PARTNERSHIP: _____

PARTY 1 - OCCUPATIONS FOR LAST 10 YEARS

PRESENT OCCUPATION _____	FIRM NAME _____	ADDRESS _____	NO. OF YEARS _____
PRIOR OCCUPATION _____	FIRM NAME _____	ADDRESS _____	NO. OF YEARS _____

PARTY 1 - RESIDENCES FOR LAST 10 YEARS

NUMBER AND STREET _____	CITY and STATE _____	FROM _____	TO _____
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PARTY 2 - OCCUPATIONS FOR LAST 10 YEARS

PRESENT OCCUPATION _____	FIRM NAME _____	ADDRESS _____	NO. OF YEARS _____
PRIOR OCCUPATION _____	FIRM NAME _____	ADDRESS _____	NO. OF YEARS _____

PARTY 2 - RESIDENCES FOR LAST 10 YEARS (If same as Party 1, write "same")

NUMBER AND STREET _____	CITY and STATE _____	FROM _____	TO _____
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DATE _____ HOME PHONE _____ BUSINESS PHONE _____

SIGNATURES _____