CONFIDENTIAL INFORMATION STATEMENT

Citrus Tree Escrow, Inc.

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) or domestic partner 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.

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:							
SSN: Driver's License:			cense:		SSN: Driver'			Driver's Lie	er's License:			
I am:						I am:						
☐ Single ☐ Married ☐ Have a Domestic Partner						☐ Single ☐ Married ☐ Have a Domestic Partner						
Name of CURRENT Spouse/Domestic Partner						Name of CURRENT Spouse/Domestic Partner						
(If Different Than Party 2)						(If Different Than Party 1)						
Name of FORMER Spouse/Domestic Partner (If None, Write "None")						Name of FORMER Spouse/Domestic Partner (If None, Write "None")						
(II None, wi	ne None)					(II None, write None)						
☐ Deceased ☐ Divorced						☐ Deceased ☐ Divorced						
When:						When:						
Where:						Where:						
_					_							
				Last 10	Years (Of Residency						
	Address							From(Da	nte)	To(Date)		
PARTY ONE												
	Address							From(Da	nte)	To(Date)		
	Address								From(Da	uta)	To(Date)	
PARTY TWO	ridaress								Trom(Da	iic)	To(Date)	
	Address							From(Da	nte)	To(Date)		
				T (77)								
	Occupation		rs Of Occupations Address No. Years									
PARTY	Occupation Firm Name				A						110. 10015	
ONE	Occupation Firm Name				Ad	ldress					No. Years	
PARTY TWO	Occupation Firm Name			Ad	ldress					No. Years		
	Occupation	Occupation Firm Name			Λi	Address					No. Years	
	Occupation Firm Name				A	iuicss					INO. 1 Cals	
<u> </u>												
Party C	<u>One</u>					Party Two						
Signature:						Signature:						
Date:						Date:						
·												
Home Phone:						Home Phone:						
Mobile Number:						Mobile Number:						
Email Address:						Email Address:						