

INCOME PROPERTY LENDING

A division of the All Star Group, Inc.

Statement
of
Facts

CONFIDENTIAL INFORMATION FOR YOUR PROTECTION

This statement is to be signed personally by each party to the transaction and by both husband and wife before title insurance can be written. When filled in completely, it will serve to establish identity, eliminate matters affecting persons of similar name, protect you against forgeries, and speed the completion of your title order.

My Full Name

Residences and Occupations
During Past 10 Years

(if more space needed, use reverse side of form)

Former
Marriages

_____ Date of Birth _____
 (First Name) (Full Middle-If none indicate) (Last Name)

Business Phone _____ Home Phone _____ Birth Place _____

Soc. Sec. # _____ I have lived in the U.S. since _____

Full name of wife
 husband _____

Her _____ Her _____
 His Birth Place _____ His Date of birth _____

Her _____ She _____
 His Soc. Sec. # _____ He Has lived continuously in the U.S. since _____

We were married on _____ at _____

Wife's maiden name _____

Driver's License # (His) _____ (Hers) _____

RESIDENCES

Number and Street	City	From (date)	To (date)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

OCCUPATIONS

Husband's			
Occupation	Firm	City	No. Years
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Wife's			
Occupation	Firm	City	No. Years
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Former Marriage? Yes No (If yes, please complete the following)

Name of former wife _____

Deceased _____ Divorced _____ Interlocutory _____ Final _____ Where _____
 Date Date Date Date Date Date

Name of former husband _____

Deceased _____ Divorced _____ Interlocutory _____ Final _____ Where _____
 Date Date Date Date Date Date

THE STREET ADDRESS of the property in the transaction is _____ (Leave blank if none)

IMPROVEMENTS: single residence multiple residence commercial Any portion of new loan funds
OCCUPIED BY: owner lessee tenants Used for construction? Yes No

Date _____ Signature _____

ORDER NO. _____ Signature _____ (If married, both husband and wife should sign)