SWORN OWNER'S STATEMENT TO FIDELITY NATIONAL TITLE INSURANCE COMPANY

Page	of	

STATE OF	Escrow No SS. Guarantee No					
COUNTY OF						
The affiant,	_		(Name), being first duly sworn, on oath deposes and says th			
he/she is/are the owner(s) o)* / be	eneficiary of Trust No	held by			which	
the Owner* of the following	described premises in the	e County of	, State of	, co	mmonly known(Street Address	
That with respect to imp future work or materials	ughly familiar with all the fa provements on the premises, s relative to the contemplate full, true and complete state	all contracts let for wo	ork done or material futed below;	urnished to date or for the	_	
NAME AND ADDRESS	KIND OF WORK OR MATERIAL	ADJUSTED TOTAL CONTRACT (INC. EXTRAS & CREDITS)	AMOUNT PREVIOUSLY PAID	AMOUNT OF THIS PAYMENT	BALANCE TO BECOME DUE	
TOTAL						
STRIKE ONE THE U	I NDERSIGNED HER DATE			AMOUNTS FOR I	PAYMENT.	
DDRESS				on to octore me this	, 20	

Notary Public

TIHZ13C