ENTITY NAME:

ENTITY TYPE: Corporation ☐ LLC ☐ Partnership ☐

ASSESSOR'S PARCEL NUMBER:

MEMBERS	% OWNED
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____

Additional Remarks: _____

_____

I hereby certify that the above information is true and correct to the best of my belief and knowledge. I am making this statement under penalty of perjury under the laws of the State of California.

Signature Date

Title Telephone Number