ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
ATTORNET OR FARTT WITHOUT ATTORNET (Maine, State par humber, and address).	TOR COURT USE ONET
TELEPHONE NO.: FAX NO.:	
EMAIL ADDRESS:	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO	
STREET ADDRESS: MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
IN THE MATTER OF	
IN THE MATTER OF:	
Adonting Adult	
, Adopting Adult	
CONSENT OF SPOUSE OF ADOPTING ADULT	CASE NUMBER:
	1
I (spouse) of _	
1(spouse) of _	
the Petitioner (Adopting Adult) herein, does hereby fully and freely consen	nt to the adoption of Proposed Adoptee:
, an adult p	berson, by my salu spouse.
IN WITNESS WHEREOF, the undersigned has executed consent on	day of
withes whereof, the undersigned has executed consent on	day or
Dated:	
Daleu.	
Type or Print Name	Signature – Spouse of Adopting Adult
Type or Print Name	Signature - Spouse of Adopting Addit