

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____ STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
IN THE MATTER OF THE PETITION OF: _____	
<p style="text-align: center;">CONSENT OF SPOUSE OF ADULT TO BE ADOPTED</p>	CASE NUMBER: _____

I, _____, the wife/husband of _____ a Petitioner herein, do hereby fully and freely consent to the adoption of my husband/wife by _____.

IN WITNESS WHEREOF, the undersigned has executed this consent on _____ day of _____ month, _____ year.

Date: _____

Print Name

Signature of Spouse of Adult to be Adopted