## UNITED STATES BANKRUPTCY COURT

## **DISTRICT OF**



## STATEMENT OF SOCIAL-SECURITY NUMBER(S)

(or other Individual Taxpayer-Identification Number(s) (ITIN(s)))

1.Name of Debtor (Last, First, Middle):
(Check the appropriate box and, if applicable, provide the required information.)
☐ Debtor has a Social-Security Number and it is:
(If more than one, state all.)
☐ Debtor does not have a Social-Security Number but has an Individual Taxpayer-Identification Number (ITIN), and it is:
(If more than one, state all.)
☐ Debtor does not have either a Social-Security Number or an Individual Taxpayer-Identification Number (ITIN).
2.Name of Joint Debtor (Last, First, Middle):
(Check the appropriate box and, if applicable, provide the required information.)
☐ Joint Debtor has a Social-Security Number and it is: (If more than one, state all.)
☐ Joint Debtor does not have a Social-Security Number but has an Individual Taxpayer-Identi-
fication Number (ITIN) and it is:
(If more than one, state all.)
☐ Joint Debtor does not have either a Social-Security Number or an Individual Taxpayer-Identification
Number (ITIN).
I declare under penalty of perjury that the foregoing is true and correct.
XSignature of Debtor Date
Signature of Debtor Date
X Signature of Joint Debtor Date
Signature of Joint Debtor Date
*Joint debtors must provide information for both spouses

Penalty for making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571.