

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF INDIANA

In re)
)
) Case No.
) Chapter
)
 Debtor(s))

STATEMENT OF SOCIAL SECURITY NUMBER(S)

1. Name of Debtor (enter 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.

2. Name of Joint Debtor (enter 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.

I declare under penalty of perjury that the foregoing is true and correct.

X _____
Signature of Debtor Date

X _____
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.