

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TENNESSEE**

In re

Case No.

Debtor(s).

Chapter

Address _____

Last 4 digits of SSN(s): (h) _____
(w) _____

Emp. Tax ID No.(s) [If any]:

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 **Date¹**

**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.