

**United States Bankruptcy Court
District of Vermont**

In re:

Case No _____

Chapter _____

Debtor(s)

STATEMENT OF SOCIAL SECURITY NUMBER(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.

2. Name of Joint Debtor¹ (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 perjury² that the foregoing is true and correct.

Signature of Debtor

Date

Signature of Joint Debtor

Date

¹ Joint debtors must provide information for both spouses.

² 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.