UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA

In re *(set forth here all names including married, maiden, and trade names used by the debtor within last 6 years)*: Debtor.	FOR COURT USE ONLY **NOT TO BE FILED**
Address:	Case No.: Chapter:
Last four digits of Social Security Number(s): ☐ Complete Employer's Tax Identification Number(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.

_____ _____
Signature of 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.**