

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF CONNECTICUT**

In re \_\_\_\_\_ )  
 )  
 ) CHAPTER \_\_\_\_\_  
 )  
 ) CASE NO. \_\_\_\_\_  
 )  
 )  
 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.

\_\_\_\_\_  
Signature of Debtor Date

\_\_\_\_\_  
Signature of Joint Debtor Date

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*\*Joint debtors must provide information for both spouses.  
Penalty for making a false statement: Fine up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571.*