## IN THE UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF TENNESSEE

<ul> <li>(Check the appropriate box and, if applicable, provide the required information</li> <li>□ Debtor has a Social Security Number and it is:</li></ul>		Dobt		se no	
Name of Debtor (Last, First, Middle):  (Check the appropriate box and, if applicable, provide the required information (If more than one SSN, list all)  Debtor does not have a Social Security Number.  Name of Joint Debtor (Last, First, Middle): (Check the appropriate box and, if applicable, provide the required information (Check the appropriate box and, if applicable, provide the required information (If more than one SSN, list all)  Joint Debtor has a Social Security Number and it is:		Dept	or(s).		
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 SSN, list all)  Debtor does not have a Social Security Number.  Name of Joint Debtor (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 SSN, list all)  Joint Debtor does not have a Social Security Number.  We declare under penalty of perjury that the foregoing is true and correct.  X  Signature of Debtor  Date			STATEMENT OF SOCIAL SECU	RITY NUMBER(S)*	
Check the appropriate box and, if applicable, provide the required information  Debtor has a Social Security Number and it is:	filin	g a join	t petition, information for both spouses mu	st be provided on this form.	
(If more than one SSN, list all)  Debtor does not have a Social Security Number.  Name of Joint Debtor (Last, First, Middle): (Check the appropriate box and, if applicable, provide the required information  Joint Debtor has a Social Security Number and it is:		Nam (Che	Name of Debtor (Last, First, Middle):  (Check the appropriate box and, if applicable, provide the required information)		
Name of Joint Debtor (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 SSN, list all)  Joint Debtor does not have a Social Security Number.  /We declare under penalty of perjury that the foregoing is true and correct.  X  Signature of Debtor  Date				nd it is:	
(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 SSN, list all)  Joint Debtor does not have a Social Security Number.  I/We declare under penalty of perjury that the foregoing is true and correct.  X  Signature of Debtor  Date			Debtor does not have a Social Security	Number.	
(If more than one SSN, list all)  Joint Debtor does not have a Social Security Number.  //We declare under penalty of perjury that the foregoing is true and correct.  X  Signature of Debtor  Date	2.				
I/We declare under penalty of perjury that the foregoing is true and correct.   X  Signature of Debtor  Date				oer and it is:	
X Signature of Debtor Date			Joint Debtor does not have a Social Sec	curity Number.	
Signature of Debtor Date  X	/We	declare	e under penalty of perjury that the foregoing	g is true and correct.	
<b>x</b>		X			
			Signature of Debtor	Date	
Signature of Joint Debtor Date		X			
			Signature of Joint Debtor	Date	

\* If debtor has an Individual Taxpayer Identification Number, that number must be provided on this form. Please note "ITIN".

Penalty for making a false statement: Fine up to \$250,000 or imprisonment for up to 5 years, or both. 18 U.S.C. § 152 & § 3571