

***Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.***

<b>UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF CALIFORNIA</b>	
In re	Case No.:
Debtor(s).*	<b>STATEMENT OF SOCIAL SECURITY NUMBER(S)</b> <i>(or other Individual Taxpayer Identification Number(s) (ITIN(s))</i>

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 but has an Individual Taxpayer Identification Number (ITIN), and it is: \_\_\_\_\_ .  
(If more than one, state all.)

☐ Debtor does not have either a Social Security Number or an Individual Taxpayer Identification Number (ITIN).

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 but has an Individual Taxpayer Identification Number (ITIN), and it is: \_\_\_\_\_ .  
(If more than one, state all.)

☐ Joint Debtor does not have either a Social Security Number or an Individual Taxpayer Identification Number (ITIN).

I declare under penalty of perjury that the foregoing is true and correct.

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

X \_\_\_\_\_  
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.***