

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW HAMPSHIRE**

In re:

Bk. No.  
Chapter

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.)*

**9** Debtor has a Social Security Number and it is: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**9** 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.)*

**9** Joint Debtor has a Social Security Number and it is: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**9** Joint Debtor does not have a Social Security Number.

I declare under penalty of perjury that the foregoing social security number 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 3751.*