UNITED STATES BANKRUPTCY COURT
DISTRICT OF MASSACHUSETTS

In re

BK

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.)

/ /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.

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.