

**STATEMENT OF SOCIAL-SECURITY NUMBER OR
INDIVIDUAL TAXPAYER-IDENTIFICATION NUMBER (ITIN)**

[Caption as in Form 16A.]

STATEMENT OF SOCIAL-SECURITY NUMBER(S)
(or other Individual Taxpayer-Identification Number(s) (ITIN(s)))

1. 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, 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 (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.