

**DECLARATION REGARDING CONFIRMATION OF IDENTITY
AND SOCIAL SECURITY NUMBER**

(Form to be completed by individual verifying Debtor's Identity and Social Security Number)

In re: (Debtor's Name) _____

Bankruptcy Case No. _____

Date of telephonic or video conference appearance at section 341 meeting of creditors: _____

I, _____, declare as follows:
(please type or print clearly name of person verifying Debtor's Identity and Social Security Number)

1) My name is : _____
(Print or type clearly)

2) My work address is: _____

3) My work telephone number is: _____ Email Address: _____

4) The address from where I participated in the §341 meeting of creditors is:

5) I personally verified the identity of the Debtor by checking his/her original photo identification and am attaching a photocopy of it to this document:

- Driver's License, (State & number) _____
- State Identification (State & number) _____
- Passport (Country, number, expiration date) _____
- Military Identification (Branch & ID number) _____
- Other (describe) _____

6) I personally inspected the following original document as proof of the debtor's social security number and am attaching a photocopy of it to this document:

- Social Security Card
- Social Security Administration Statement
- W-2 Form
- Recent Payroll Stub
- Employer's Health Card or Medical Insurance Card
- Other (specify)

In accordance with 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.

Executed this _____ day of _____, _____, in _____

Signature of Person Verifying Identity

Please return completed form to:

Office of U.S. Trustee