

**United States Bankruptcy Court
Eastern District of Missouri**

**FORM 21. STATEMENT OF SOCIAL SECURITY NUMBER OR
INDIVIDUAL TAXPAYER-IDENTIFICATION NUMBER (ITIN)**

In re (name(s) of debtor(s))

Case No. year-number-judge

Chapter

STATEMENT OF SOCIAL SECURITY NUMBER(S)

(or other Individual Taxpayer-Identification Number(s) (ITIN(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 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.