

STATEMENT REGARDING PERSONAL INJURY

If you have any questions regarding this Statement contact your attorney's office

IN RE: _____

CASE NO. _____

(Place you name(s) and case No. as shown on your bankruptcy paperwork)

I, the Debtor in the above case, by signing below, attest that I have a potential personal injury or litigious claim. Below is the contact information for the Attorney handling this potential claim or lawsuit.

Attorney Name: _____

Attorney Address: _____

Attorney Phone No: _____

Case No. _____ Claim No. _____ Lawsuit No. _____

Debtor :

Date: _____

Sign Your Name: _____

Print Your Name: _____

Phone Number: _____