

341 INFORMATION REQUEST FORM

Bankruptcy No.: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Name of Debtor: \_\_\_\_\_

Current Address of Debtor: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name, Address & Phone  
Number of Employer(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date Employment Started: \_\_\_\_\_

Domestic Support  
Obligation(s): \_\_\_\_\_ I am not required to pay any Domestic Support Obligations, or  
\_\_\_\_\_ I am required to pay Domestic Support Obligations and I have paid any  
(check the statement that amounts payable under a Court Order or Statute that were due on or before  
applies to you.) today's date - complete section below, or  
\_\_\_\_\_ I am required to pay Domestic Support Obligations but I have not paid all  
amounts due under Court Order or Statute as of today's date - complete  
section below.

I make Domestic Support Payments to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Support Payments (i.e. child support, alimony)

\_\_\_\_\_  
\_\_\_\_\_

The information I have provided above is true and correct to the best of my knowledge and belief. I AUTHORIZE THE STANDING TRUSTEE TO INCLUDE MY FULL SOCIAL SECURITY NUMBER WHEN PROVIDING THE WRITTEN NOTICE REQUIRED BY 11 U.S.C. §1302((d)(1)(B)(i) TO THE STATE CHILD SUPPORT ENFORCEMENT AGENCY.

\_\_\_\_\_  
Debtor's Signature