

UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF RHODE ISLAND

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In re: :

Debtor(s) : BK No.
Chapter

:
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CERTIFICATION BY PRO SE DEBTOR

On _____, a voluntary bankruptcy petition was filed by the undersigned, appearing pro se and without legal counsel. Certification is hereby made that:

CHECK EITHER ITEM 1 OR 2 ONLY. IF ITEM 2 IS SELECTED, PROVIDE NAME AND ADDRESS OF ASSISTANCE PROVIDER:

(1) _____ No persons and/or entities, other than myself/us, assisted in the preparation, typing, and/or completion of said petition and/or related schedules;

(2) _____ the following persons and/or entities constitute the only persons/entities who assisted in the preparation, typing, and/or completion of said petition and all related schedules, and represent the only sums paid by me/us for these services:

NAME AND ADDRESS OF ASSISTANCE PROVIDER	TOTAL AMOUNT PAID
_____	_____

I hereby certify under penalty of perjury that the above information is true and accurate to the best of my knowledge. I am aware that the providing of false or incomplete information may result in the denial of discharge in bankruptcy and/or other sanctions.

DATE

SIGNATURE

Phone number () _____