

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW MEXICO

In re

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

[*Name of debtor(s) + last 4 digits of SSN*],

Debtor(s).

No. \_\_\_\_\_  
[*case number, e.g., 7-03-13131 MR*]

**CERTIFICATE OF MAILING OF NOTICE OF  
CORRECTION OF SOCIAL SECURITY NUMBER**

I certify that on \_\_\_\_\_ (date), I mailed a Notice of Correction of Social Security Number for the debtor whose name is shown below to the trustee, all creditors and indenture trustees in this case as shown on the attached mailing list.

Debtor name: \_\_\_\_\_

Last 4 digits of incorrect SSN: \_\_\_\_\_

**Last 4 digits of CORRECT SSN:** \_\_\_\_\_

\_\_\_\_\_  
Signature of attorney or self-represented debtor

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Note to filer: File this certificate with the Clerk. DO NOT attach a copy of the Notice of Correction of Social Security Number.