

UNITED STATES BANKRUPTCY COURT
Western District of Wisconsin

PAYMENT ADVICES COVER SHEET
in Accordance with 11 U.S.C. Sec. 521(a)(1)(B)(iv)

In re: _____

Case No.: _____

Debtor(s)

Please check the appropriate box.

For Debtor:

- ☐ Payment advices (pay stubs) are attached.
 - ☐ No payment advices (pay stubs) are attached (the debtor had no income from any employer during the 60 days prior to filing the bankruptcy petition).
 - ☐ No payment advices (pay stubs) attached for other reason, or some payment advices missing (please explain). _____
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For Joint Debtor, if applicable:

- ☐ Payment advices (pay stubs) are attached.
 - ☐ No payment advices (pay stubs) are attached (the debtor had no income from any employer during the 60 days prior to filing the bankruptcy petition).
 - ☐ No payment advices (pay stubs) attached for other reason, or some payment advices missing (please explain). _____
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I declare under penalty of perjury that I have read this payment advices cover sheet and the attached payment advices, consisting of _____ sheets, numbered 1 through _____, and that they are true and correct to the best of my knowledge, information and belief.

Signature of Debtor: _____ **Date:** _____

Signature of Joint Debtor: _____ **Date:** _____