List Creditor Name and <u>COMPLETE</u> Address Including Street and/or PO Box, City, State & Zip If turned over to a Collection Agency, list original creditor name and their <u>COMPLETE</u> address as well as the Collection Agency and their <u>COMPLETE</u> address.	J H & H	Date Debt Occurred (please list MONTH & YEAR)	Reason for Debt (for example: auto, mortgage, medical, loan, credit card, etc.)	Balance Owed	Law Office Use Only
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DATE: _____ SIGNATURE: _____ PRINT NAME: _____

ALL OF YOUR DEBTS MUST APPEAR ON THESE "DEBT SHEETS" WHETHER OR NOT YOU PLAN ON PAYING THEM.

I CERTIFY THESE ARE ALL MY DEBTS: