

U.S. Bankruptcy Court for the
Western District of Pennsylvania

Electronic Mailing Matrix Submission

Date: _____

Case Number: _____

Debtor's Name: _____

Number of Creditors: _____

(The U.S. Trustee's Office does not need to be included in the list of creditors.)

Attorney &/or Firm Name: _____

Address: _____

Telephone Number: _____

I hereby certify that the information contained on the accompanying diskette is true and correct to the best of my knowledge.

Signature: _____