

BOWLING GREEN MUNICIPAL COURT
 711 S. Dunbridge Rd.
 Bowling Green, OH 43402
 Phone: 419-352-5263
 Fax: 419-352-9407

In Re:

 Debtor

 Address

 City/State/Zip

Tel. Hm. _____ Wk. _____

Employer _____

No. _____

STATEMENT AS TO CREDITORS

Pay Period: _____

STATE OF OHIO, WOOD COUNTY, SS:

The following is a full, accurate, and complete statement of the names of the unsecured creditors of the undersigned, their addresses, and amount due and owing to each:

NAME	ADDRESS	ACCT #	AMOUNT DUE
1.			
2.			
3.			
4.			
5.			
6.			
7.			

8.			
9.			
10.			
11.			
12.			
13.			
14.			

On ____/____/____
 sworn to before me and
 subscribed in my presence
 (seal)

 Debtor

- _____
 Clerk of Court Deputy Clerk
 Notary Public, Com. Exp. ____/____/____
 Judge