

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI**

In Re:

Case No.

Chapter

Debtor(s).

CERTIFICATE OF SERVICE

I certify that a copy of the Application for Payment of Unclaimed Funds and the required supporting documentation were sent by: _____
(Specify Method of Delivery, e.g., USPS First-Class Mail postage prepaid)
to the following:

U.S. Attorney, Western District of Missouri
400 East 9th Street, Room 5510
Kansas City, MO 64106

I certify that a copy of the Application for Payment of Unclaimed Funds was sent by:

(Specify Method of Delivery, e.g., USPS First-Class Mail postage prepaid)
to Previous Owner(s) of Claim (if applicable):

[Enter name and current address for each previous owner served, or provide a statement with your application addressing why service is not possible.]

Dated:

Signature
Print Name: _____
Address: _____

Phone: _____
Email: _____