OFFICE OF THE CHAPTER 13 STANDING TRUSTEE Isabel C. Balboa, Chapter 13 Standing Trustee

Certification of Business Debtor

for Independent Contractor and/or 1099 Employee

Note: All fields highlighted in red must be completed.

Case Number:

E-mail:

I, as the Debtor(s) named above, being of full age & duly sworn upon my oath, depose and say:

I'm an Independent Contractor for:	1 Company.	2 Com	panies.	
	3 Companies.	4 Com	panies.	
	5 Companies.	6-10 C	6-10 Companies.	
	More than 10 companies.			
I'm an Independent Contractor for:				
I'm an Independent Contractor for:				
I'm an Independent Contractor for:				
The nature of my business is:				
I started as an independent contractor (mm/dd/yyyy):				
Individual Income Tax Returns have been filed with the IRS through the year ending:	12/31/2011.	12/31/2012.	12/31/2013.	
	12/31/2014.	12/31/2015.	12/31/2016.	
	12/31/2017.	12/31/2018.	12/31/2019.	
	12/31/2020.	Not Required.	Not Required.	
I have received all 1099-MICS through the year ending:	12/31/2011.	12/31/2012.	12/31/2013.	
	12/31/2014.	12/31/2015.	12/31/2016.	
	12/31/2017.	12/31/2018.	12/31/2019.	
	12/31/2020.	Not Required.		

As an Independent Contractor., I:	have have not	been paid for all work I performed as of the time of filing.
As an Independent Contractor, I:	have do not have	W-2 employees.
As an Independent Contractor, I:	use do not use	sub-contractors.
As an Independent Contractor, I:	do do not	have separate insurance for the work I perform.
As an Independent Contractor, I:	have do not have	an individual license for the work I perform.
As an Independent Contractor, my assets, including tools, equipment, inventory and accounts, total:		

YOU MUST SUPPLY THE FOLLOWING DOCUMENT(S) WITH THIS CERTIFICATION OF BUSINESS DEBTOR:

PROVIDE COPIES OF THE LAST TWO (2) TAX RETURNS, ALONG WITH ALL SUPPORTING SCHEDULES, STATEMENTS, AND 1099-MICS. NOTE: Please redact SS#s (XXX-XX-1234), dependent(s)' names, and birth dates.

PROVIDE A COPY OF THE CURRENT INSURANCE POLICIES DECLARATION PAGE. NOTE: If proof of effective insurance is not provided to the Trustee within ten (10) days prior to the first scheduled 341(a) Meeting of Creditors, the Trustee may move to dismiss this case.

PROVIDE A COPY OF THE CURRENT PERMIT, LICENSE OR CERTIFICATE. Types of permits include, but are not limited to, Seller's Permit. Types of license include, but are not limited to, Attorney License, Broker's License, CDL, CPA License, Medical License, Mercantile License, NJHI Contractor's License, and Real Estate License. Types of certificates include, but are not limited to, Accountant Certificate, Child Care Provider Certificate, and Trade Name or Fictitious Name Certificate.

PLEASE NOTE THAT BANK STATEMENTS AND / OR PROFIT AND LOSS STATEMENT MAY BE REQUIRED AFTER THE TRUSTEE'S REVIEW OF THIS CERTIFICATION AND THE DOCUMENTS PROVIDED.

I declare, as the Debtor(s) named above, under penalty of perjury that the foregoing information is true and correct.

I have attached all required documents requested (i.e. Tax Returns, 1099-MISCs, Declaration Page for Insurance, License).

I read and acknowledge Responsibilities as a Business Debtor (www.standingtrustee.com/forms).

I understand that filing this document under the Trustee's Filing System (T.F.S.) constitutes the Participant's signature for purposes of signing the document under Fed. R. Bankr. P. 9011.

/s/ Print Debtor's Name:

/s/ Print Co-Debtor's Name:

Dated (mm/dd/yyyy):