

UNITED STATES BANKRUPTCY COURT
Western District of Louisiana

-----X
In Re: Debtor(s) Name

CASE NO.

Chapter

-----X

CERTIFICATE OF SERVICE

The undersigned certifies on _____, a copy of the Application for Payment of Unclaimed Funds, was deposited in an enclosed, properly addressed postage paid envelope, and served by US First Class Mail upon the following:

United States Attorney for Western District of Louisiana
300 Fannin St., Suite 3201
Shreveport, LA 71101

Debtor(s) Name and Address

Date:

Signature

Printed Name:
Company Name:
Company Address: