

Declaration for Insolvency Proceedings

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Insolvency Court's Name]

[Court's Address]

[City, State, Zip Code]

Subject: Declaration for Insolvency Proceedings

Dear Honorable [Judge's Name],

I, [Your Name], hereby submit this declaration in accordance with the insolvency proceedings initiated against me. As required under [relevant law or section], I wish to provide the following information:

1. Personal Information

Name: [Your Full Name]

Date of Birth: [Your Date of Birth]

Social Security Number: [Your SSN]

2. Financial Information

Current financial condition: [Brief description of your financial state]

Liabilities: [List of current debts]

Assets: [List of current assets]

3. Declaration Statement

I declare that I am unable to pay my debts as they become due, and I request that the court initiate insolvency proceedings against me to resolve my financial obligations.

Thank you for your attention to this matter. I look forward to your guidance.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]