

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF FLORIDA**
www.flsb.uscourts.gov

In re: _____ Bankruptcy Case No. _____
Chapter _____

_____ Debtor /

Debtor's Address:
Employers' Tax Identification No. [if any]:

**APPEARANCE OF CHILD SUPPORT CREDITOR*
OR REPRESENTATIVE**

This appearance is filed pursuant to Local Rule 5080-1 to establish eligibility for waiver of certain filing fees. I understand that the filing of this appearance does not substitute for the filing of a proof of claim or any other papers required to be filed in order to bring a matter or claim before the court.

I certify under penalty of perjury that I am a child support creditor* of the above-named debtor, or the authorized representative of such child support creditor, with respect to the child support obligation which is set out below.

NAME OF CHILD SUPPORT CREDITOR _____	
If assigned, name of assignee _____	
Summary of child support obligation	
Amount in arrears: \$ _____	If child support has been assigned: Amount of support which is owed under assignments: \$ _____
Amount currently due per week or per month on a continuing basis: \$ _____ (per week) (per month)	Amount owed primary child support creditor (balance not assigned): \$ _____
Attach an itemized statement of account	

*Child support creditor includes both a creditor to whom the debtor has a primary obligation to pay child support as well as any entity to whom such support has been assigned, if pursuant to Section 402(a)(26) of the Social Security Act or if such debt has been assigned to the Federal Government or to any State or political subdivision of a State.

Date: _____ Signature: _____
Print name: _____
Organization [if applicable]: _____
Address: _____

Telephone Number: _____

Indicate signer status:

___ primary child support creditor ___ representative of primary child support creditor
___ assignee of child support obligation ___ representative of assignee of child support obligation