**IN THE UNITED STATES BANKRUPTCY COURT**

**FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

**IN RE:**

**: CHAPTER 13**

**:**

**: CASE NO. 20- Debtor(s)**

**CERTIFICATION OF NO PAYMENT ADVICES**

**PURSUANT TO 11 U.S.C. § 521(a)(1)(B)(iv)**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name of Debtor), hereby certify that within sixty (60) days before the date of filing the above-captioned bankruptcy petition, I did not receive payment advices (e.g. “pay stubs”), as contemplated by 11 U.S.C. § 521(a)(1)(B)(iv), **from any source of employment**. I further certify that I received no payment advices during that period because:

\_\_\_ I have been unable to work due to a disability throughout the sixty (60) days immediately preceding the date of the above-captioned petition.

\_\_\_ I have received no regular income other than Social Security payments throughout the sixty (60) days immediately preceding the date of the above-captioned petition.

\_\_\_ My sole source of regular employment income throughout the sixty (60) days immediately preceding the date of the above-captioned petition has been through self-employment from which I do not receive evidence of wages or a salary at fixed intervals.

\_\_\_I have been unemployed throughout the sixty (60) days immediately preceding the date of the above-captioned petition.

\_\_\_ I did not receive payment advices due to factors other than those listed above. (Please explain)

I certify under penalty of perjury that the information provided in this certification is true and correct to the best of my knowledge and belief.

Date: \_\_\_\_\_\_\_\_ \_\_\_\_, 20\_\_

Debtor