

**UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF WISCONSIN**

In re:

Case No.:

Debtor

Chapter:

CERTIFICATE OF SERVICE

NOTICE IS HEREBY GIVEN that on _____, _____,
I deposited in the Post Office in the City of _____, State of _____,
Securely enclosed in a sealed envelope, a true and correct copy of:

Affidavit and Request for Release of Unclaimed Funds

To: United States Attorney
Attention: Civil Process Clerk
Eastern District of Wisconsin
Room 530, Federal
Courthouse 517 East
Wisconsin Avenue Milwaukee,
WI 53202

United States Bankruptcy Court
Eastern District of Wisconsin
Room 126, Federal Courthouse
517 East Wisconsin Avenue
Milwaukee, WI 53202

Dated:

Signature

Printed Name