## **United States Bankruptcy Court for**

## **Governmental Addresses**

## Register of Mailing Addresses of Federal and State Governmental Units

## **Request for Listing**

Pursuant to Federal Rule of Bankruptcy Procedure 5003(e), a federal, state, or local governmental unit may file with the Court a statement designating its mailing address to be included in an official register of such addresses maintained by the Court. Please list our address under the governmental addresses.

| Official Name of (  | Governmental Entity:                                                                                                                            |                                       |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
|                     | Massachusetts Department of Re                                                                                                                  | evenue                                |
| Address:            |                                                                                                                                                 |                                       |
|                     | setts Department of Revenue                                                                                                                     |                                       |
|                     | s Bureau/Bankruptcy Unit                                                                                                                        |                                       |
| P. O. Box           |                                                                                                                                                 |                                       |
|                     | A 02204-7090                                                                                                                                    |                                       |
| Dostori, ivii       | A 02204-7030                                                                                                                                    | al fill a fillian dept. Te- fill      |
| complete a separa   | ing more than one address to be used in the<br>ate copy of this form for each address submit<br>words) of when it is appropriate to use the abo | ted and include in this space a brief |
|                     |                                                                                                                                                 |                                       |
|                     | Updated Address                                                                                                                                 |                                       |
|                     | opadioa / laaress                                                                                                                               |                                       |
|                     |                                                                                                                                                 |                                       |
|                     |                                                                                                                                                 |                                       |
| Telephone Numbe     | er (Required):                                                                                                                                  |                                       |
|                     |                                                                                                                                                 |                                       |
|                     | (617) 626-3875                                                                                                                                  | a 3 H                                 |
| Fax Number:         | The same Room at the Miles                                                                                                                      |                                       |
| *                   | (617) 626-3796                                                                                                                                  |                                       |
| 14                  |                                                                                                                                                 |                                       |
| Email Address:      | 1 1 0 1 1 1                                                                                                                                     | A 10                                  |
|                     | dorebn@dor.state.ma.us                                                                                                                          |                                       |
|                     |                                                                                                                                                 |                                       |
| Website:<br>https:/ | //www.mass.gov/orgs/massachus                                                                                                                   | setts-department-of-revenue           |
| Date Submitted:     |                                                                                                                                                 |                                       |
|                     | 7/20/2022                                                                                                                                       |                                       |
|                     | . ,                                                                                                                                             | 7.0                                   |
| Signature Title     |                                                                                                                                                 |                                       |
|                     | DI . + D. DD                                                                                                                                    |                                       |
|                     | Christine Connelly                                                                                                                              |                                       |
|                     |                                                                                                                                                 | 8                                     |