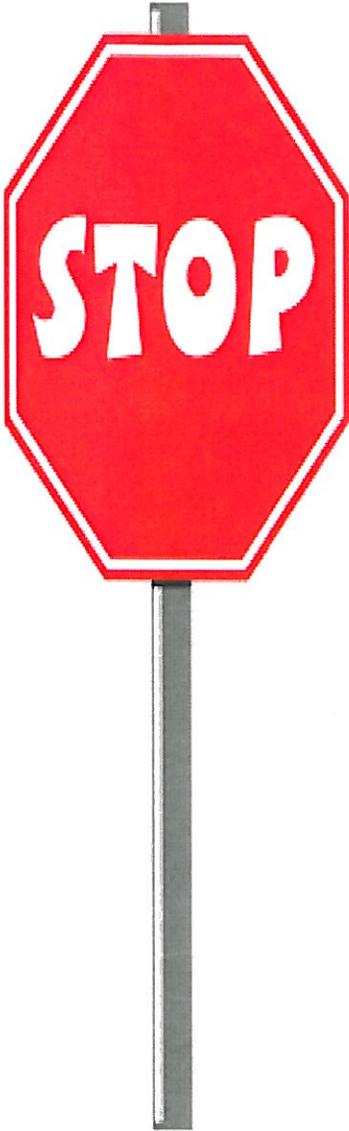


CHAPTER 13 Packet includes the following:

**Notice: Have you completed Credit Counseling
Debtor's Requirement to Send Documents to the Trustee (1 page)
Voluntary Petition (8 pages)
Initial Statement About an Eviction Judgment Against You
Statement About Payment of an Eviction Judgment Against You
Summary of Your Assets and Liabilities and Certain Statistical Info.
Schedules A-J
Statement of Financial Affairs
Declaration About an Individual Debtor's Schedules
Bankruptcy Petition Preparer's Notice, Declaration and Signature
Chapter 13 Statement of Current Monthly Income (Form 122C-1)
Chapter 13 Calculation of Your Disposable Income (Form 122C-2)
Chapter 13 Plan and Notice of Resistance Deadline (Appendix "D")
Certification by Debtor in Support of Confirmation (Appendix "H")
Certification by Debtor in Support of Discharge (Form 2830)
Statement of Social Security Numbers (Form 121)
Application to Pay Filing Fee in Installments (See Neb. R. Bankr. P. 1006-1
for filing fee requirements)
Mailing Matrix Sample
Payment Methods
DeBN (Debtor's Electronic Noticing Request) - Brochure and Request
form**



UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEBRASKA

HAVE YOU COMPLETED CREDIT COUNSELING?

From a U.S. Trustee Approved Agency [11 U.S.C § 109(h)]

READ THIS BEFORE YOU FILE YOUR CASE

If you have not completed counseling before you file your petition and you do not meet the requirements for an extension to complete the counseling after filing:

- Your case may be **DISMISSED** without refund of any filing fee paid;
- You **WILL NOT** receive a **DISCHARGE** of your debts;
- If you **REFILE** within **ONE YEAR** after dismissal, protection under the Bankruptcy Code from your creditors (i.e. the automatic stay) may be limited to thirty days.

Under the bankruptcy laws, the court can only allow you to complete the course after filing if you meet all of the following conditions. See 11 USC § 109(h)(3).

- 1) You must have tried to get credit counseling from an approved agency before bankruptcy but were not able to obtain the counseling during the 5-day period after you made the request; AND
- 2) There are exigent (emergency) circumstances that make it necessary for you to file your case immediately (Important: The court will determine what qualifies as an emergency circumstance);
- 3) You must file a certification stating the facts regarding conditions 1) and 2) above with your petition.

The decision to file your petition is up to you, but if you file without taking the course, you are risking dismissal of your case. The clerk cannot provide legal advice or predict in advance how a judge will decide your request for an extension to complete this requirement for credit counseling.

To complete this requirement before filing the petition, obtain from the clerk a list of United States Trustee approved pre bankruptcy credit counseling agencies or go to this website:

<http://www.usdoj.gov/ust/eo/bapcpa/ccde/index.htm>

You may take the course on the Internet, by telephone, or in person. If you do not have a computer, your public library may allow you to use their public computers.

NOTE: A waiver of the credit counseling requirement is available in very limited circumstances for persons on military duty in an active combat zone, or persons with a physical or mental impairment preventing participation in credit counseling, in person, by telephone, or on the Internet. A waiver must be granted by the court. 11 U.S.C. § 109(h)(4).

(9/16/2009)

United States Bankruptcy Court
District of Nebraska

Chapter 13 Debtor(s) Requirement to Send Documents to the Trustee

IMPORTANT INFORMATION - Please Read

In addition to the documents you are required to file with the court, there is additional documentation that you are required to send to the trustee assigned to your case.

In accordance with 11 U.S.C. § 521, Interim Fed.R.Bankr.P. 4002, chapter 7 debtors are required to provide COPIES of the following documents (or a written statement that the documentation does not exist or is not in your possession) to the trustee **prior to the first date set for the § 341 meeting of creditors.**

1. Your **Federal income tax return** (or transcript) for the most recent tax year ending immediately before filing your bankruptcy petition and for which a Federal income tax was filed.
2. **Statements** for each of your checking, savings and investment accounts, including money market accounts, mutual funds and brokerage accounts for the time period that includes the date of the filing of the petition.
3. All of your **payment advices** or other evidence of payment (i.e., pay stubs and/or earnings statements) that you received within 60 days before filing your bankruptcy petition.

DEADLINES

If you fail to provide the Federal income tax return and the statements to the trustee AT LEAST 7 calendar days before your § 341 meeting of creditors, your case may be DISMISSED.

Pay advices must be sent to the trustee NO LATER THAN 15 days after the petition is filed, or your case may be DISMISSED.

The trustee may request that you provide additional documents depending upon your case. In addition to the duties described in this notice, you may also have other duties to perform that are not listed here.

If any of the documents listed in this notice are filed with the court, the court will not forward them to the trustee. It is the debtor's responsibility to send these documents directly to the trustee. For further information, please refer to the Self Help Filing Information located on the bankruptcy court's web site at www.neb.uscourts.gov.

Fill in this information to identify your case:

United States Bankruptcy Court for the:

_____ District of _____
(State)

Case number (if known): _____ Chapter you are filing under:
 Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
<p>1. Your full name</p> <p>Write the name that is on your government-issued picture identification (for example, your driver’s license or passport).</p> <p>Bring your picture identification to your meeting with the trustee.</p>	<p>_____</p> <p>First name</p> <p>_____</p> <p>Middle name</p> <p>_____</p> <p>Last name</p> <p>_____</p> <p>Suffix (Sr., Jr., II, III)</p>	<p>_____</p> <p>First name</p> <p>_____</p> <p>Middle name</p> <p>_____</p> <p>Last name</p> <p>_____</p> <p>Suffix (Sr., Jr., II, III)</p>
<p>2. All other names you have used in the last 8 years</p> <p>Include your married or maiden names.</p>	<p>_____</p> <p>First name</p> <p>_____</p> <p>Middle name</p> <p>_____</p> <p>Last name</p> <p>_____</p> <p>First name</p> <p>_____</p> <p>Middle name</p> <p>_____</p> <p>Last name</p>	<p>_____</p> <p>First name</p> <p>_____</p> <p>Middle name</p> <p>_____</p> <p>Last name</p> <p>_____</p> <p>First name</p> <p>_____</p> <p>Middle name</p> <p>_____</p> <p>Last name</p>
<p>3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)</p>	<p>XXX – XX – _____</p> <p>OR</p> <p>9 XX – XX – _____</p>	<p>XXX – XX – _____</p> <p>OR</p> <p>9 XX – XX – _____</p>

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

I have not used any business names or EINs.

Business name

Business name

EIN

EIN

I have not used any business names or EINs.

Business name

Business name

EIN

EIN

5. Where you live

Number Street

City State ZIP Code

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

If Debtor 2 lives at a different address:

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Four horizontal lines for explanation.

Check one:

I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Four horizontal lines for explanation.

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- Chapter 7
Chapter 11
Chapter 12
Chapter 13

8. How you will pay the fee

- I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

- No
Yes. District When Case number
MM / DD / YYYY
District When Case number
MM / DD / YYYY
District When Case number
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- No
Yes. Debtor Relationship to you
District When Case number, if known
MM / DD / YYYY
Debtor Relationship to you
District When Case number, if known
MM / DD / YYYY

11. Do you rent your residence?

- No. Go to line 12.
Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
No. Go to line 12.
Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

- No. Go to Part 4.
Yes. Name and location of business

Name of business, if any
Number Street
City State ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
Stockbroker (as defined in 11 U.S.C. § 101(53A))
Commodity Broker (as defined in 11 U.S.C. § 101(6))
None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- No. I am not filing under Chapter 11.
No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

- No
Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property? Number Street

City State ZIP Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:**

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:**

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”

No. Go to line 16b.
 Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No
 Yes

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

18. How many creditors do you estimate that you owe?

<input type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X _____ **X** _____
 Signature of Debtor 1 Signature of Debtor 2

Executed on _____ Executed on _____
 MM / DD / YYYY MM / DD / YYYY

Debtor 1

First Name Middle Name Last Name

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

Signature of Attorney for Debtor Date
MM / DD / YYYY

Printed name

Firm name

Number Street

City State ZIP Code

Contact phone Email address

Bar number State

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

- No
- Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

- No
- Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

- No
- Yes. Name of Person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

x

Signature of Debtor 1

Date _____
MM / DD / YYYY

Contact phone _____

Cell phone _____

Email address _____

x

Signature of Debtor 2

Date _____
MM / DD / YYYY

Contact phone _____

Cell phone _____

Email address _____

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(If known)

Official Form 101A

Initial Statement About an Eviction Judgment Against You

12/15

File this form with the court and serve a copy on your landlord when you first file bankruptcy only if:

- you rent your residence; and
- your landlord has obtained a judgment for possession in an eviction, unlawful detainer action, or similar proceeding (called *eviction judgment*) against you to possess your residence.

Landlord's name _____

Landlord's address _____
Number Street

_____ City _____ State _____ ZIP Code _____

If you want to stay in your rented residence after you file your case for bankruptcy, also complete the certification below.

Certification About Applicable Law and Deposit of Rent

I certify under penalty of perjury that:

- Under the state or other nonbankruptcy law that applies to the judgment for possession (*eviction judgment*), I have the right to stay in my residence by paying my landlord the entire delinquent amount.
- I have given the bankruptcy court clerk a deposit for the rent that would be due during the 30 days after I file the *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).

X _____
Signature of Debtor 1

X _____
Signature of Debtor 2

Date _____
MM / DD / YYYY

Date _____
MM / DD / YYYY

- Stay of Eviction:** (a) **First 30 days after bankruptcy.** If you checked both boxes above, signed the form to certify that both apply, and served your landlord with a copy of this statement, the automatic stay under 11 U.S.C. § 362(a)(3) will apply to the continuation of the eviction against you for 30 days after you file your *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).
- (b) **Stay after the initial 30 days.** If you wish to stay in your residence after that 30-day period and continue to receive the protection of the automatic stay under 11 U.S.C. § 362(a)(3), you must pay the entire delinquent amount to your landlord as stated in the eviction judgment before the 30-day period ends. You must also fill out *Statement About Payment of an Eviction Judgment Against You* (Official Form 101B), file it with the bankruptcy court, and serve your landlord a copy of it before the 30-day period ends.

Check the Bankruptcy Rules (www.uscourts.gov/rulesandpolicies/rules.aspx) and the local court's website (to find your court's website, go to www.uscourts.gov/Court_Locator.aspx) for any specific requirements that you might have to meet to serve this statement. 11 U.S.C. §§ 362(b)(22) and 362(l)

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(if known)

Official Form 101B

Statement About Payment of an Eviction Judgment Against You

12/15

Fill out this form only if:

- you filed *Initial Statement About an Eviction Judgment Against You* (Official Form 101A); and
- you served a copy of Form 101A on your landlord; and
- you want to stay in your rented residence for more than 30 days after you file your *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).

File this form within 30 days after you file your *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). Also serve a copy on your landlord within that same time period.

Certification About Applicable Law and Payment of Eviction Judgment

I certify under penalty of perjury that (Check all that apply):

- Under the state or other nonbankruptcy law that applies to the judgment for possession (*eviction judgment*), I have the right to stay in my residence by paying my landlord the entire delinquent amount.
- Within 30 days after I filed my *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101), I have paid my landlord the entire amount I owe as stated in the judgment for possession (*eviction judgment*).

X _____
Signature of Debtor 1

X _____
Signature of Debtor 2

Date _____
MM / DD / YYYY

Date _____
MM / DD / YYYY

You must serve your landlord with a copy of this form.

Check the Bankruptcy Rules (www.uscourts.gov/rulesandpolicies/rules.aspx) and the court's local website (go to http://www.uscourts.gov/Court_Locator.aspx to find your court's website) for any specific requirements that you might have to meet to serve this statement.

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(If known)

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets
	Value of what you own
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$ _____
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ _____
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$ _____

Part 2: Summarize Your Liabilities

	Your liabilities
	Amount you owe
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$ _____
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ _____
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+ \$ _____
Your total liabilities	\$ _____

Part 3: Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ _____
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ _____

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*.

	Total claim
From Part 4 on <i>Schedule E/F</i>, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ _____
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ _____
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ _____
9d. Student loans. (Copy line 6f.)	\$ _____
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ _____
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ _____
9g. Total. Add lines 9a through 9f.	\$ _____

Fill in this information to identify your case and this filing:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.
- Yes. Where is the property?

1.1. _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____

Current value of the portion you own? \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number: _____

If you own or have more than one, list here:

1.2. _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ _____

Current value of the portion you own? \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number: _____

1.3. _____
 Street address, if available, or other description

 City State ZIP Code

 County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
--	--

\$ _____	\$ _____
----------	----------

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.** →

\$ _____

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

3.1. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
--	--

\$ _____	\$ _____
----------	----------

If you own or have more than one, describe here:

3.2. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
--	--

\$ _____	\$ _____
----------	----------

3.3. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

[Empty box for other information]

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

3.4. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

[Empty box for other information]

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

4.1. Make: _____
Model: _____
Year: _____
Other information:

[Empty box for other information]

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

If you own or have more than one, list here:

4.2. Make: _____
Model: _____
Year: _____
Other information:

[Empty box for other information]

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$ [Empty box for total value]

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No Yes. Describe \$

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No Yes. Describe \$

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No Yes. Describe \$

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No Yes. Describe \$

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No Yes. Describe \$

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No Yes. Describe \$

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No Yes. Describe \$

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No Yes. Describe \$

14. Any other personal and household items you did not already list, including any health aids you did not list

No Yes. Give specific information..... \$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here \$

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following? **Current value of the portion you own?**
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No
 Yes..... Cash: \$ _____

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No
 Yes..... Institution name:

17.1. Checking account:		\$ _____
17.2. Checking account:		\$ _____
17.3. Savings account:		\$ _____
17.4. Savings account:		\$ _____
17.5. Certificates of deposit:		\$ _____
17.6. Other financial account:		\$ _____
17.7. Other financial account:		\$ _____
17.8. Other financial account:		\$ _____
17.9. Other financial account:		\$ _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No
 Yes..... Institution or issuer name:

		\$ _____
		\$ _____
		\$ _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No
 Yes. Give specific information about them.....

	Name of entity: _____	% of ownership: _____%	\$ _____
	_____	_____%	\$ _____
	_____	_____%	\$ _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

Form for section 20 with checkboxes for 'No' and 'Yes. Give specific information about them.' and lines for issuer name and dollar amounts.

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

Form for section 21 with checkboxes for 'No' and 'Yes. List each account separately..' and lines for account types and dollar amounts.

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company. Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

Form for section 22 with checkboxes for 'No' and 'Yes..' and lines for various categories like Electric, Gas, Heating oil, etc. and dollar amounts.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

Form for section 23 with checkboxes for 'No' and 'Yes..' and lines for issuer name and description and dollar amounts.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

Three lines for listing institutions with dollar amounts.

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them...

Text box for details and a dollar amount line.

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them...

Text box for details and a dollar amount line.

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them...

Text box for details and a dollar amount line.

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Text box for tax refund details.

Federal, State, and Local dollar amount lines.

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.

Text box for family support details.

Alimony, Maintenance, Support, Divorce settlement, Property settlement dollar amount lines.

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information.

Text box for other amounts and a dollar amount line.

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value. ... Company name: Beneficiary: Surrender or refund value: \$

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Give specific information. ... \$

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim. ... \$

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Describe each claim. ... \$

35. Any financial assets you did not already list

No

Yes. Give specific information. ... \$

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here



\$

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6. Yes. Go to line 38.

Current value of the portion you own? Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

No

Yes. Describe. ... \$

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe. ... \$

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No
Yes. Describe..... \$

41. Inventory

No
Yes. Describe..... \$

42. Interests in partnerships or joint ventures

No
Yes. Describe..... Name of entity: % of ownership: \$

43. Customer lists, mailing lists, or other compilations

No
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
No
Yes. Describe..... \$

44. Any business-related property you did not already list

No
Yes. Give specific information \$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

\$

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
Yes. Go to line 47.

Current value of the portion you own? Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No
Yes..... \$

48. Crops—either growing or harvested

No
 Yes. Give specific information. _____ \$ _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No
 Yes _____ \$ _____

50. Farm and fishing supplies, chemicals, and feed

No
 Yes _____ \$ _____

51. Any farm- and commercial fishing-related property you did not already list

No
 Yes. Give specific information. _____ \$ _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here _____ →

\$ _____

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information. _____ \$ _____
 \$ _____
 \$ _____

54. Add the dollar value of all of your entries from Part 7. Write that number here _____ →

\$ _____

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 _____ → \$ _____

56. Part 2: Total vehicles, line 5 \$ _____

57. Part 3: Total personal and household items, line 15 \$ _____

58. Part 4: Total financial assets, line 36 \$ _____

59. Part 5: Total business-related property, line 45 \$ _____

60. Part 6: Total farm- and fishing-related property, line 52 \$ _____

61. Part 7: Total other property not listed, line 54 + \$ _____

62. Total personal property. Add lines 56 through 61. _____ \$ _____ Copy personal property total → + \$ _____

63. Total of all property on Schedule A/B. Add line 55 + line 62. _____ \$ _____

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
(if known)

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. **Which set of exemptions are you claiming?** *Check one only, even if your spouse is filing with you.*

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. **For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	<small>Copy the value from <i>Schedule A/B</i></small>	<small>Check only one box for each exemption.</small>	
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - No
 - Yes

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
 (If known)

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>
--	--	--

2.1	Describe the property that secures the claim: _____ \$ _____ \$ _____ \$ _____		
Creditor's Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	Date debt was incurred _____ Last 4 digits of account number _____

2.2	Describe the property that secures the claim: _____ \$ _____ \$ _____ \$ _____		
Creditor's Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	Date debt was incurred _____ Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:	\$ _____
---	----------

Part 1:	Additional Page	<i>Column A</i>	<i>Column B</i>	<i>Column C</i>
	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

□		Describe the property that secures the claim:	\$ _____	\$ _____	\$ _____
	Creditor's Name _____				
	Number _____ Street _____				
	City _____ State _____ ZIP Code _____				
	Who owes the debt? Check one.		As of the date you file, the claim is: Check all that apply.		
	<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another		Nature of lien. Check all that apply.		
	<input type="checkbox"/> Check if this claim relates to a community debt		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)		
	Date debt was incurred _____		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)		
			<input type="checkbox"/> Judgment lien from a lawsuit		
			<input type="checkbox"/> Other (including a right to offset) _____		
			Last 4 digits of account number _____		

□		Describe the property that secures the claim:	\$ _____	\$ _____	\$ _____
	Creditor's Name _____				
	Number _____ Street _____				
	City _____ State _____ ZIP Code _____				
	Who owes the debt? Check one.		As of the date you file, the claim is: Check all that apply.		
	<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another		Nature of lien. Check all that apply.		
	<input type="checkbox"/> Check if this claim relates to a community debt		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)		
	Date debt was incurred _____		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)		
			<input type="checkbox"/> Judgment lien from a lawsuit		
			<input type="checkbox"/> Other (including a right to offset) _____		
			Last 4 digits of account number _____		

□		Describe the property that secures the claim:	\$ _____	\$ _____	\$ _____
	Creditor's Name _____				
	Number _____ Street _____				
	City _____ State _____ ZIP Code _____				
	Who owes the debt? Check one.		As of the date you file, the claim is: Check all that apply.		
	<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another		Nature of lien. Check all that apply.		
	<input type="checkbox"/> Check if this claim relates to a community debt		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)		
	Date debt was incurred _____		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)		
			<input type="checkbox"/> Judgment lien from a lawsuit		
			<input type="checkbox"/> Other (including a right to offset) _____		
			Last 4 digits of account number _____		

Add the dollar value of your entries in Column A on this page. Write that number here:	\$ _____
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	\$ _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name _____

Number Street _____

City State ZIP Code _____

On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number _____

Name _____

Number Street _____

City State ZIP Code _____

On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number _____

Name _____

Number Street _____

City State ZIP Code _____

On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number _____

Name _____

Number Street _____

City State ZIP Code _____

On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number _____

Name _____

Number Street _____

City State ZIP Code _____

On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number _____

Name _____

Number Street _____

City State ZIP Code _____

On which line in Part 1 did you enter the creditor? _____
Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
 (If known)

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
- Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1

Priority Creditor's Name _____ **Last 4 digits of account number** _____ \$ _____ \$ _____ \$ _____

Number _____ Street _____ **When was the debt incurred?** _____

City _____ State _____ ZIP Code _____ **As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of PRIORITY unsecured claim:

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify _____

2.2

Priority Creditor's Name _____ **Last 4 digits of account number** _____ \$ _____ \$ _____ \$ _____

Number _____ Street _____ **When was the debt incurred?** _____

City _____ State _____ ZIP Code _____ **As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Is the claim subject to offset?

- No
- Yes

Type of PRIORITY unsecured claim:

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify _____

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim Priority amount Nonpriority amount

Form entry 1: Priority Creditor's Name, Last 4 digits of account number, When was the debt incurred?, As of the date you file, the claim is: Check all that apply. Who incurred the debt?, Type of PRIORITY unsecured claim: Is the claim subject to offset?

Form entry 2: Priority Creditor's Name, Last 4 digits of account number, When was the debt incurred?, As of the date you file, the claim is: Check all that apply. Who incurred the debt?, Type of PRIORITY unsecured claim: Is the claim subject to offset?

Form entry 3: Priority Creditor's Name, Last 4 digits of account number, When was the debt incurred?, As of the date you file, the claim is: Check all that apply. Who incurred the debt?, Type of PRIORITY unsecured claim: Is the claim subject to offset?

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1 _____
Nonpriority Creditor's Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____
Last 4 digits of account number _____ \$ _____
When was the debt incurred? _____
As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____
Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

4.2 _____
Nonpriority Creditor's Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____
Last 4 digits of account number _____ \$ _____
When was the debt incurred? _____
As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____
Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

4.3 _____
Nonpriority Creditor's Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____
Last 4 digits of account number _____ \$ _____
When was the debt incurred? _____
As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____
Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

Input box for claim number

Nonpriority Creditor's Name, Number, Street, City, State, ZIP Code

Who incurred the debt? Check one. Debtor 1 only, Debtor 2 only, Debtor 1 and Debtor 2 only, At least one of the debtors and another. Check if this claim is for a community debt. Is the claim subject to offset? No, Yes

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent, Unliquidated, Disputed

Type of NONPRIORITY unsecured claim:

- Student loans, Obligations arising out of a separation agreement or divorce that you did not report as priority claims, Debts to pension or profit-sharing plans, and other similar debts, Other. Specify

Input box for claim number

Nonpriority Creditor's Name, Number, Street, City, State, ZIP Code

Who incurred the debt? Check one. Debtor 1 only, Debtor 2 only, Debtor 1 and Debtor 2 only, At least one of the debtors and another. Check if this claim is for a community debt. Is the claim subject to offset? No, Yes

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent, Unliquidated, Disputed

Type of NONPRIORITY unsecured claim:

- Student loans, Obligations arising out of a separation agreement or divorce that you did not report as priority claims, Debts to pension or profit-sharing plans, and other similar debts, Other. Specify

Input box for claim number

Nonpriority Creditor's Name, Number, Street, City, State, ZIP Code

Who incurred the debt? Check one. Debtor 1 only, Debtor 2 only, Debtor 1 and Debtor 2 only, At least one of the debtors and another. Check if this claim is for a community debt. Is the claim subject to offset? No, Yes

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent, Unliquidated, Disputed

Type of NONPRIORITY unsecured claim:

- Student loans, Obligations arising out of a separation agreement or divorce that you did not report as priority claims, Debts to pension or profit-sharing plans, and other similar debts, Other. Specify

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line ___ of (Check one): [] Part 1: Creditors with Priority Unsecured Claims
[] Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line ___ of (Check one): [] Part 1: Creditors with Priority Unsecured Claims
[] Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line ___ of (Check one): [] Part 1: Creditors with Priority Unsecured Claims
[] Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line ___ of (Check one): [] Part 1: Creditors with Priority Unsecured Claims
[] Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line ___ of (Check one): [] Part 1: Creditors with Priority Unsecured Claims
[] Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line ___ of (Check one): [] Part 1: Creditors with Priority Unsecured Claims
[] Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line ___ of (Check one): [] Part 1: Creditors with Priority Unsecured Claims
[] Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ___ ___ ___ ___

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ _____
	6b. Taxes and certain other debts you owe the government	6b. \$ _____
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ _____
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ _____
	6e. Total. Add lines 6a through 6d.	6e. <div style="border: 1px solid black; padding: 2px;">\$ _____</div>

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ _____
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ _____
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ _____
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ _____
	6j. Total. Add lines 6f through 6i.	6j. <div style="border: 1px solid black; padding: 2px;">\$ _____</div>

Fill in this information to identify your case:

Debtor _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse If filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(If known)

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Name _____ Number Street _____ City State ZIP Code _____	
2.2	Name _____ Number Street _____ City State ZIP Code _____	
2.3	Name _____ Number Street _____ City State ZIP Code _____	
2.4	Name _____ Number Street _____ City State ZIP Code _____	
2.5	Name _____ Number Street _____ City State ZIP Code _____	



Additional Page if You Have More Contracts or Leases

Person or company with whom you have the contract or lease	What the contract or lease is for
2. _____ Name _____ Number Street _____ City State ZIP Code _____	
2. _____ Name _____ Number Street _____ City State ZIP Code _____	
2. _____ Name _____ Number Street _____ City State ZIP Code _____	
2. _____ Name _____ Number Street _____ City State ZIP Code _____	
2. _____ Name _____ Number Street _____ City State ZIP Code _____	
2. _____ Name _____ Number Street _____ City State ZIP Code _____	
2. _____ Name _____ Number Street _____ City State ZIP Code _____	
2. _____ Name _____ Number Street _____ City State ZIP Code _____	

Fill in this information to identify your case:

Debtor 1 _____
 First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
 (State)

Case number _____
 (If known)

Check if this is an amended filing

Official Form 106H
Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

- Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)
 No
 Yes
- Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)
 No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 No
 Yes. In which community state or territory did you live? _____. Fill in the name and current address of that person.

 Name of your spouse, former spouse, or legal equivalent

 Number Street

 City State ZIP Code

- In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1	_____ Name _____ Number Street _____ City State ZIP Code	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3.2	_____ Name _____ Number Street _____ City State ZIP Code	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
3.3	_____ Name _____ Number Street _____ City State ZIP Code	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

<p>3._</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(If known)

Check if this is:

- An amended filing
- A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- Employed
- Not employed

- Employed
- Not employed

Occupation

Employer's name

Employer's address

Number _____ Street _____	Number _____ Street _____
_____	_____
_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ _____	\$ _____
3. Estimate and list monthly overtime pay.	3. + \$ _____	+ \$ _____
4. Calculate gross income. Add line 2 + line 3.	4. \$ _____	\$ _____

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here → 4.	\$ _____	\$ _____	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a. \$ _____	\$ _____	
5b. Mandatory contributions for retirement plans	5b. \$ _____	\$ _____	
5c. Voluntary contributions for retirement plans	5c. \$ _____	\$ _____	
5d. Required repayments of retirement fund loans	5d. \$ _____	\$ _____	
5e. Insurance	5e. \$ _____	\$ _____	
5f. Domestic support obligations	5f. \$ _____	\$ _____	
5g. Union dues	5g. \$ _____	\$ _____	
5h. Other deductions. Specify: _____	5h. + \$ _____	+ \$ _____	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6. \$ _____	\$ _____	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ _____	\$ _____	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ _____	\$ _____	
8b. Interest and dividends	8b. \$ _____	\$ _____	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ _____	\$ _____	
8d. Unemployment compensation	8d. \$ _____	\$ _____	
8e. Social Security	8e. \$ _____	\$ _____	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ _____	\$ _____	
8g. Pension or retirement income	8g. \$ _____	\$ _____	
8h. Other monthly income. Specify: _____	8h. + \$ _____	+ \$ _____	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9. \$ _____	\$ _____	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ _____	+ \$ _____	= \$ _____
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____			
		11. + \$ _____	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12.	\$ _____ Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?			
<input type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain: 			

Fill in this information to identify your case:

Debtor 1 _____
 First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
 (State)

Case number _____
 (If known)

Check if this is:

- An amended filing
- A supplement showing postpetition chapter 13 expenses as of the following date:

 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
- Yes. **Does Debtor 2 live in a separate household?**
 - No
 - Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.
 Do not state the dependents' names.

<input type="checkbox"/> No	<input type="checkbox"/> Yes. Fill out this information for each dependent.....	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- No
- Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

	Your expenses
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.	4. \$ _____
If not included in line 4:	
4a. Real estate taxes	4a. \$ _____
4b. Property, homeowner's, or renter's insurance	4b. \$ _____
4c. Home maintenance, repair, and upkeep expenses	4c. \$ _____
4d. Homeowner's association or condominium dues	4d. \$ _____

Your expenses

- 5. **Additional mortgage payments for your residence**, such as home equity loans 5. \$ _____
- 6. **Utilities:**
 - 6a. Electricity, heat, natural gas 6a. \$ _____
 - 6b. Water, sewer, garbage collection 6b. \$ _____
 - 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ _____
 - 6d. Other. Specify: _____ 6d. \$ _____
- 7. **Food and housekeeping supplies** 7. \$ _____
- 8. **Childcare and children's education costs** 8. \$ _____
- 9. **Clothing, laundry, and dry cleaning** 9. \$ _____
- 10. **Personal care products and services** 10. \$ _____
- 11. **Medical and dental expenses** 11. \$ _____
- 12. **Transportation.** Include gas, maintenance, bus or train fare.
Do not include car payments. 12. \$ _____
- 13. **Entertainment, clubs, recreation, newspapers, magazines, and books** 13. \$ _____
- 14. **Charitable contributions and religious donations** 14. \$ _____
- 15. **Insurance.**
Do not include insurance deducted from your pay or included in lines 4 or 20.
 - 15a. Life insurance 15a. \$ _____
 - 15b. Health insurance 15b. \$ _____
 - 15c. Vehicle insurance 15c. \$ _____
 - 15d. Other insurance. Specify: _____ 15d. \$ _____
- 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: _____ 16. \$ _____
- 17. **Installment or lease payments:**
 - 17a. Car payments for Vehicle 1 17a. \$ _____
 - 17b. Car payments for Vehicle 2 17b. \$ _____
 - 17c. Other. Specify: _____ 17c. \$ _____
 - 17d. Other. Specify: _____ 17d. \$ _____
- 18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).** 18. \$ _____
- 19. **Other payments you make to support others who do not live with you.**
Specify: _____ 19. \$ _____
- 20. **Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**
 - 20a. Mortgages on other property 20a. \$ _____
 - 20b. Real estate taxes 20b. \$ _____
 - 20c. Property, homeowner's, or renter's insurance 20c. \$ _____
 - 20d. Maintenance, repair, and upkeep expenses 20d. \$ _____
 - 20e. Homeowner's association or condominium dues 20e. \$ _____

21. Other. Specify: _____

21. +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ _____

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ _____

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ _____

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ _____

23b. Copy your monthly expenses from line 22c above.

23b. - \$ _____

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(if known)

Check if this is:

- An amended filing
- A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J-2

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. *If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J.* Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Do you and Debtor 1 maintain separate households?

- No. Do not complete this form.
- Yes

2. Do you have dependents?

No

Yes. Fill out this information for each dependent.....

Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.

Do not state the dependents' names.

Dependent's relationship to Debtor 2:

Dependent's age

Does dependent live with you?

_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ _____

If not included in line 4:

4a. Real estate taxes 4a. \$ _____

4b. Property, homeowner's, or renter's insurance 4b. \$ _____

4c. Home maintenance, repair, and upkeep expenses 4c. \$ _____

4d. Homeowner's association or condominium dues 4d. \$ _____

Your expenses

- 5. **Additional mortgage payments for your residence**, such as home equity loans 5. \$ _____
- 6. **Utilities:**
 - 6a. Electricity, heat, natural gas 6a. \$ _____
 - 6b. Water, sewer, garbage collection 6b. \$ _____
 - 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ _____
 - 6d. Other. Specify: _____ 6d. \$ _____
- 7. **Food and housekeeping supplies** 7. \$ _____
- 8. **Childcare and children's education costs** 8. \$ _____
- 9. **Clothing, laundry, and dry cleaning** 9. \$ _____
- 10. **Personal care products and services** 10. \$ _____
- 11. **Medical and dental expenses** 11. \$ _____
- 12. **Transportation.** Include gas, maintenance, bus or train fare.
Do not include car payments. 12. \$ _____
- 13. **Entertainment, clubs, recreation, newspapers, magazines, and books** 13. \$ _____
- 14. **Charitable contributions and religious donations** 14. \$ _____
- 15. **Insurance.**
Do not include insurance deducted from your pay or included in lines 4 or 20.
 - 15a. Life insurance 15a. \$ _____
 - 15b. Health insurance 15b. \$ _____
 - 15c. Vehicle insurance 15c. \$ _____
 - 15d. Other insurance. Specify: _____ 15d. \$ _____
- 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: _____ 16. \$ _____
- 17. **Installment or lease payments:**
 - 17a. Car payments for Vehicle 1 17a. \$ _____
 - 17b. Car payments for Vehicle 2 17b. \$ _____
 - 17c. Other. Specify: _____ 17c. \$ _____
 - 17d. Other. Specify: _____ 17d. \$ _____
- 18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).** 18. \$ _____
- 19. **Other payments you make to support others who do not live with you.**
Specify: _____ 19. \$ _____
- 20. **Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**
 - 20a. Mortgages on other property 20a. \$ _____
 - 20b. Real estate taxes 20b. \$ _____
 - 20c. Property, homeowner's, or renter's insurance 20c. \$ _____
 - 20d. Maintenance, repair, and upkeep expenses 20d. \$ _____
 - 20e. Homeowner's association or condominium dues 20e. \$ _____

Debtor 1

First Name

Middle Name

Last Name

Case number (if known)

21. **Other.** Specify: _____

21. **+\$** _____

22. **Your monthly expenses.** Add lines 5 through 21.

The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.

22. \$ _____

23. Line not used on this form.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
(If known)

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married
- Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No
- Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
Number Street _____ _____	From _____ To _____	Number Street _____ _____	From _____ To _____
City State ZIP Code _____		City State ZIP Code _____	
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
Number Street _____ _____	From _____ To _____	Number Street _____ _____	From _____ To _____
City State ZIP Code _____		City State ZIP Code _____	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

- No
- Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No
- Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
For last calendar year: (January 1 to December 31, _____) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____
For the calendar year before that: (January 1 to December 31, _____) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ _____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No
- Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
For last calendar year: (January 1 to December 31, _____) YYYY	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
For the calendar year before that: (January 1 to December 31, _____) YYYY	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Table with 4 columns: Dates of payment, Total amount paid, Amount you still owe, Was this payment for... (Mortgage, Car, Credit card, Loan repayment, Suppliers or vendors, Other). Includes three rows of creditor information.

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- No
- Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name _____ Number Street _____ City State ZIP Code _____	_____	\$ _____	\$ _____	
Insider's Name _____ Number Street _____ City State ZIP Code _____	_____	\$ _____	\$ _____	

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- No
- Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name _____ Number Street _____ City State ZIP Code _____	_____	\$ _____	\$ _____	Include creditor's name
Insider's Name _____ Number Street _____ City State ZIP Code _____	_____	\$ _____	\$ _____	

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- No
- Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title _____ _____		Court Name _____	<input type="checkbox"/> Pending
Case number _____		Number Street _____	<input type="checkbox"/> On appeal
		City State ZIP Code _____	<input type="checkbox"/> Concluded
Case title _____ _____		Court Name _____	<input type="checkbox"/> Pending
Case number _____		Number Street _____	<input type="checkbox"/> On appeal
		City State ZIP Code _____	<input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- No. Go to line 11.
- Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name _____ Number Street _____ City State ZIP Code _____		_____	\$ _____
	Explain what happened		
	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Creditor's Name _____ Number Street _____ City State ZIP Code _____		_____	\$ _____
	Explain what happened		
	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- No
- Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name <hr/> Number Street <hr/> City State ZIP Code			\$
	Last 4 digits of account number: XXXX-__ __ __ __		

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- No
- Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- No
- Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift <hr/> Number Street <hr/> City State ZIP Code Person's relationship to you _____			\$
			\$

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift <hr/> Number Street <hr/> City State ZIP Code Person's relationship to you _____			\$
			\$

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- No
- Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name		_____	\$ _____
Number Street		_____	\$ _____
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- No
- Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	_____	\$ _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- No
- Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Number Street		_____	\$ _____
City State ZIP Code		_____	\$ _____
Email or website address			
Person Who Made the Payment, if Not You			

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid <hr/> Number Street <hr/> City State ZIP Code <hr/> Email or website address <hr/> Person Who Made the Payment, if Not You <hr/>	<div style="border: 1px solid black; height: 150px;"></div>	<hr/>	\$ <hr/>
		<hr/>	\$ <hr/>

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
 Do not include any payment or transfer that you listed on line 16.

- No
- Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid <hr/> Number Street <hr/> City State ZIP Code <hr/>	<div style="border: 1px solid black; height: 100px;"></div>	<hr/>	\$ <hr/>
		<hr/>	\$ <hr/>

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
 Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
 Do not include gifts and transfers that you have already listed on this statement.

- No
- Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer <hr/> Number Street <hr/> City State ZIP Code <hr/> Person's relationship to you _____ <hr/>	<div style="border: 1px solid black; height: 150px;"></div>	<hr/>
Person Who Received Transfer <hr/> Number Street <hr/> City State ZIP Code <hr/> Person's relationship to you _____ <hr/>		<hr/>

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- No
Yes. Fill in the details.

Table with 2 columns: Description and value of the property transferred, Date transfer was made. Includes field for Name of trust.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- No
Yes. Fill in the details.

Table with 4 columns: Last 4 digits of account number, Type of account or instrument, Date account was closed, sold, moved, or transferred, Last balance before closing or transfer. Includes fields for Name of Financial Institution, Number, Street, City, State, ZIP Code.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- No
Yes. Fill in the details.

Table with 3 columns: Who else had access to it?, Describe the contents, Do you still have it?. Includes fields for Name of Financial Institution, Name, Number, Street, City, State, ZIP Code.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- No
- Yes. Fill in the details.

Who else has or had access to it?		Describe the contents	Do you still have it?
Name of Storage Facility	Name		<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- No
- Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name		\$ _____
Number Street		
City State ZIP Code		

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No
- Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site		_____
Number Street		
City State ZIP Code		

25. Have you notified any governmental unit of any release of hazardous material?

- No
Yes. Fill in the details.

Table with 3 columns: Governmental unit, Environmental law, if you know it, Date of notice. Includes fields for Name of site, Number Street, City State ZIP Code.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No
Yes. Fill in the details.

Table with 3 columns: Court or agency, Nature of the case, Status of the case. Includes fields for Case title, Court Name, Number Street, Case number, City State ZIP Code, and checkboxes for Pending, On appeal, Concluded.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
A member of a limited liability company (LLC) or limited liability partnership (LLP)
A partner in a partnership
An officer, director, or managing executive of a corporation
An owner of at least 5% of the voting or equity securities of a corporation

- No. None of the above applies. Go to Part 12.
Yes. Check all that apply above and fill in the details below for each business.

Table for business details with 2 columns: Business information (Name, Address, City State ZIP Code, Accountant) and Business identification (EIN, Dates business existed).

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(If known)

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x _____
Signature of Debtor 1

x _____
Signature of Debtor 2

Date _____
MM / DD / YYYY

Date _____
MM / DD / YYYY

Fill in this information to identify the case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____ Chapter _____
(If known)

Official Form 119

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 3. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1: Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

The bankruptcy petition preparer _____ has notified me of
Name
any maximum allowable fee before preparing any document for filing or accepting any fee.

X _____ Date _____
Signature of Debtor 1 acknowledging receipt of this notice MM / DD / YYYY

X _____ Date _____
Signature of Debtor 2 acknowledging receipt of this notice MM / DD / YYYY

Part 2: Declaration and Signature of the Bankruptcy Petition Preparer

Under penalty of perjury, I declare that:

- I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer;
- I or my firm prepared the documents listed below and gave the debtor a copy of them and the *Notice to Debtor by Bankruptcy Petition Preparer* as required by 11 U.S.C. §§ 110(b), 110(h), and 342(b); and
- if rules or guidelines are established according to 11 U.S.C. § 110(h) setting a maximum fee for services that bankruptcy petition preparers may charge, I or my firm notified the debtor of the maximum amount before preparing any document for filing or before accepting any fee from the debtor.

Printed name _____ Title, if any _____ Firm name, if it applies _____

Number _____ Street _____

City _____ State _____ ZIP Code _____ Contact phone _____

I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I check:
(Check all that apply.)

- | | | |
|---|---|---|
| <input type="checkbox"/> Voluntary Petition (Form 101) | <input type="checkbox"/> Schedule I (Form 106I) | <input type="checkbox"/> Chapter 11 Statement of Your Current Monthly Income (Form 122B) |
| <input type="checkbox"/> Statement About Your Social Security Numbers (Form 121) | <input type="checkbox"/> Schedule J (Form 106J) | <input type="checkbox"/> Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Form 122C-1) |
| <input type="checkbox"/> Summary of Your Assets and Liabilities and Certain Statistical Information (Form 106Sum) | <input type="checkbox"/> Declaration About an Individual Debtor's Schedules (Form 106Dec) | <input type="checkbox"/> Chapter 13 Calculation of Your Disposable Income (Form 122C-2) |
| <input type="checkbox"/> Schedule A/B (Form 106A/B) | <input type="checkbox"/> Statement of Financial Affairs (Form 107) | <input type="checkbox"/> Application to Pay Filing Fee in Installments (Form 103A) |
| <input type="checkbox"/> Schedule C (Form 106C) | <input type="checkbox"/> Statement of Intention for Individuals Filing Under Chapter 7 (Form 108) | <input type="checkbox"/> Application to Have Chapter 7 Filing Fee Waived (Form 103B) |
| <input type="checkbox"/> Schedule D (Form 106D) | <input type="checkbox"/> Chapter 7 Statement of Your Current Monthly Income (Form 122A-1) | <input type="checkbox"/> A list of names and addresses of all creditors (<i>creditor or mailing matrix</i>) |
| <input type="checkbox"/> Schedule E/F (Form 106E/F) | <input type="checkbox"/> Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Form 122A-1Supp) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Schedule G (Form 106G) | <input type="checkbox"/> Chapter 7 Means Test Calculation (Form 122A-2) | |
| <input type="checkbox"/> Schedule H (Form 106H) | | |

Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the documents to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110.

X _____ Date _____
Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner Social Security number of person who signed MM / DD / YYYY

Printed name

X _____ Date _____
Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner Social Security number of person who signed MM / DD / YYYY

Printed name

Fill in this information to identify your case:

Debtor 1 _____
 First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
 (State)

Case number _____
 (If known)

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

3. The commitment period is 3 years.

4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. **What is your marital and filing status?** Check one only.
- Not married.** Fill out Column A, lines 2-11.
- Married.** Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse												
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ _____	\$ _____												
3. Alimony and maintenance payments. Do not include payments from a spouse.	\$ _____	\$ _____												
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$ _____	\$ _____												
5. Net income from operating a business, profession, or farm	<table border="0" style="margin-left: auto; margin-right: auto;"> <tr> <td></td> <td style="background-color: #e0e0e0; padding: 2px;">Debtor 1</td> <td style="background-color: #e0e0e0; padding: 2px;">Debtor 2</td> </tr> <tr> <td>Gross receipts (before all deductions)</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td style="text-align: right;">- \$ _____</td> <td style="text-align: right;">- \$ _____</td> </tr> <tr> <td>Net monthly income from a business, profession, or farm</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> </table>			Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ _____	\$ _____	Ordinary and necessary operating expenses	- \$ _____	- \$ _____	Net monthly income from a business, profession, or farm	\$ _____	\$ _____
	Debtor 1	Debtor 2												
Gross receipts (before all deductions)	\$ _____	\$ _____												
Ordinary and necessary operating expenses	- \$ _____	- \$ _____												
Net monthly income from a business, profession, or farm	\$ _____	\$ _____												
	\$ _____	\$ _____												
	<table border="0" style="margin-left: auto; margin-right: auto;"> <tr> <td></td> <td style="background-color: #e0e0e0; padding: 2px;">Debtor 1</td> <td style="background-color: #e0e0e0; padding: 2px;">Debtor 2</td> </tr> <tr> <td>Gross receipts (before all deductions)</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td style="text-align: right;">- \$ _____</td> <td style="text-align: right;">- \$ _____</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> </table>			Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ _____	\$ _____	Ordinary and necessary operating expenses	- \$ _____	- \$ _____	Net monthly income from rental or other real property	\$ _____	\$ _____
	Debtor 1	Debtor 2												
Gross receipts (before all deductions)	\$ _____	\$ _____												
Ordinary and necessary operating expenses	- \$ _____	- \$ _____												
Net monthly income from rental or other real property	\$ _____	\$ _____												
	\$ _____	\$ _____												

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
7. Interest, dividends, and royalties	\$ _____	\$ _____
8. Unemployment compensation	\$ _____	\$ _____
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: _____ ↓		
For you	\$ _____	
For your spouse	\$ _____	
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$ _____	\$ _____
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Total amounts from separate pages, if any.	+ \$ _____	+ \$ _____
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ _____	+ \$ _____ = \$ _____
		Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. **Copy your total average monthly income from line 11.** _____ \$ _____

13. **Calculate the marital adjustment.** Check one:

You are not married. Fill in 0 below.

You are married and your spouse is filing with you. Fill in 0 below.

You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

_____	\$ _____	
_____	\$ _____	
_____	+ \$ _____	
Total	\$ _____	Copy here → _____

14. **Your current monthly income.** Subtract the total in line 13 from line 12. \$ _____

15. **Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here → _____ \$ _____

Multiply line 15a by 12 (the number of months in a year). x 12

15b. The result is your current monthly income for the year for this part of the form. \$ _____

16. Calculate the median family income that applies to you. Follow these steps:

- 16a. Fill in the state in which you live. _____
- 16b. Fill in the number of people in your household. _____
- 16c. Fill in the median family income for your state and size of household. \$ _____
 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

- 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Disposable Income (Official Form 122C-2)*.
- 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)

18. Copy your total average monthly income from line 11. \$ _____

19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. - \$ _____

19b. Subtract line 19a from line 18. \$ _____

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b. \$ _____

Multiply by 12 (the number of months in a year). **x 12**

20b. The result is your current monthly income for the year for this part of the form. \$ _____

20c. Copy the median family income for your state and size of household from line 16c. \$ _____

21. How do the lines compare?

- Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X _____
 Signature of Debtor 1

X _____
 Signature of Debtor 2

Date _____
 MM / DD / YYYY

Date _____
 MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.
 If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
(If known)

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1)*.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ _____

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$

7b. Number of people who are under 65 X

7c. Subtotal. Multiply line 7a by line 7b. \$ Copy here -> \$

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person \$

7e. Number of people who are 65 or older X

7f. Subtotal. Multiply line 7d by line 7e. \$ Copy here -> + \$

7g. Total. Add lines 7c and 7f. \$ Copy here -> \$

Local Standards

You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities - Insurance and operating expenses
Housing and utilities - Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$

9. Housing and utilities - Mortgage or rent expenses:

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Table with 2 columns: Name of the creditor, Average monthly payment. Includes input lines for creditor names and payments.

9b. Total average monthly payment \$ Copy here -> - \$ Repeat this amount on line 33a.

9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0. \$ Copy here -> \$

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. \$

Explain why: _____

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

- 0. Go to line 14.
1. Go to line 12.
2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. \$

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1:

13a. Ownership or leasing costs using IRS Local Standard \$

13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Table with 2 columns: Name of each creditor for Vehicle 1, Average monthly payment. Includes a plus sign and a box for total average monthly payment.

Total average monthly payment Copy here - \$ Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. If this number is less than \$0, enter \$0. Copy net Vehicle 1 expense here \$

Vehicle 2 Describe Vehicle 2:

13d. Ownership or leasing costs using IRS Local Standard \$

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Table with 2 columns: Name of each creditor for Vehicle 2, Average monthly payment. Includes a plus sign and a box for total average monthly payment.

Total average monthly payment Copy here - \$ Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense Subtract line 13e from 13d. If this number is less than \$0, enter \$0. Copy net Vehicle 2 expense here \$

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation. \$

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation. \$

Other Necessary Expenses

In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

- 16. Taxes: The total monthly amount that you actually pay for federal, state and local taxes...
17. Involuntary deductions: The total monthly payroll deductions that your job requires...
18. Life insurance: The total monthly premiums that you pay for your own term life insurance...
19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court...
20. Education: The total monthly amount that you pay for education that is either required...
21. Childcare: The total monthly amount that you pay for childcare, such as babysitting...
22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care...
23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services...
24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

Additional Expense Deductions

These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.

- 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.
Health insurance \$
Disability insurance \$
Health savings account + \$
Total \$ Copy total here -> \$
Do you actually spend this total amount?
No. How much do you actually spend? \$
Yes \$

- 26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.

\$ _____

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.

\$ _____

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

\$ _____

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).

+ \$ _____

Do not include any amount more than 15% of your gross monthly income.

32. Add all of the additional expense deductions.

\$ _____

Add lines 25 through 31.

Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Average monthly payment

Mortgages on your home

33a. Copy line 9b here -> \$ _____

Loans on your first two vehicles

33b. Copy line 13b here. -> \$ _____

33c. Copy line 13e here. -> \$ _____

33d. List other secured debts:

Table with 3 columns: Name of each creditor for other secured debt, Identify property that secures the debt, Does payment include taxes or insurance? (No/Yes) and corresponding dollar amounts.

33e. Total average monthly payment. Add lines 33a through 33d. \$ _____ Copy total here -> \$ _____

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

- No. Go to line 35.
Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below.

Table with 4 columns: Name of the creditor, Identify property that secures the debt, Total cure amount, Monthly cure amount. Includes a Total row with a box for the sum and a 'Copy total here' arrow.

35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

- No. Go to line 36.
Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims. \$ _____ ÷ 60 \$ _____

36. Projected monthly Chapter 13 plan payment

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).
To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

\$ _____
X _____
\$ _____ Copy total here \$ _____

37. Add all of the deductions for debt payment. Add lines 33e through 36.

\$ _____

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances \$ _____
Copy line 32, All of the additional expense deductions \$ _____
Copy line 37, All of the deductions for debt payment + \$ _____
Total deductions \$ _____ Copy total here \$ _____

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. \$

40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. \$

41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). \$

42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here \$

43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Table with 2 columns: Describe the special circumstances, Amount of expense. Includes a Total row with a 'Copy here' arrow pointing to a plus sign.

44. Total adjustments. Add lines 40 through 43. \$ Copy here - \$

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. \$

Part 3: Change in Income or Expenses

46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below.

Table with 6 columns: Form, Line, Reason for change, Date of change, Increase or decrease?, Amount of change. Includes checkboxes for Increase/Decrease and dollar amount fields.

Debtor 1

First Name Middle Name Last Name

Case number (if known) _____

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X _____

Signature of Debtor 1

X _____

Signature of Debtor 2

Date _____
MM / DD / YYYY

Date _____
MM / DD / YYYY

APPENDIX "D"

Revised 11/1/2014

CHAPTER 13 PLAN AND NOTICE OF RESISTANCE DEADLINE

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF NEBRASKA

IN THE MATTER OF:)
) CASE NO. BK _____
) Chapter 13
)
) CHAPTER 13 PLAN
) AND
 Debtor(s).) NOTICE OF RESISTANCE DEADLINE

1. PAYMENTS.

The debtor or debtors (hereinafter called "Debtor") submits to the standing Chapter 13 trustee all projected disposable income to be received within the applicable commitment period of the plan. The payment schedule is as follows:

A. Monthly Payment Amount [include any previous payments]	B. Number of Payments	Base Amount (AxB)
\$		\$
\$		\$
\$		\$
\$		\$

Total Plan Base Amount: \$ _____

The payment shall be withheld from the Debtor's paycheck: Yes No
Employee's name from whose check the payment is deducted: _____
Employer's name, address, city, state, phone: _____

Debtor is paid: Monthly Twice monthly Weekly Biweekly Other

This plan cures any previous arrearage in payments to the Chapter 13 trustee under any prior plan filed in this case.

NOTE: PLAN PAYMENTS TO THE TRUSTEE MUST BEGIN IMMEDIATELY FOR PLANS REQUIRING PRE-CONFIRMATION ADEQUATE PROTECTION PAYMENTS OR LEASE PAYMENTS. IN THOSE CASES PROVIDING FOR EMPLOYER DEDUCTIONS, THE DEBTOR MUST MAKE DIRECT PAYMENT TO THE TRUSTEE BY MONEY ORDER OR CASHIER'S CHECK UNTIL THEIR EMPLOYER DEDUCTION BEGINS. IN CASES WITHOUT PRE-CONFIRMATION PAYMENTS, PLAN PAYMENTS MUST COMMENCE WITHIN 30 DAYS OF FILING OF THE PETITION. THE DEBTOR MUST MAKE DIRECT PAYMENT TO THE TRUSTEE UNTIL THEIR EMPLOYER DEDUCTION BEGINS.

2. ORDER OF PAYMENT OF CLAIMS.

Applicable trustee fees shall be deducted, pursuant to 28 U.S.C. § 586(e). Claims shall be paid in the following order: (1) 11 U.S.C. § 1326(a)(1)(B) & (C) pre-confirmation payments for adequate protection or leases of personal property; (2) payments to secured creditors under 11 U.S.C. § 1325(a)(5), payments due on executory contracts, the Debtor's attorney fees, 11 U.S.C. § 507(a)(1)(A) priority domestic support claims and approved Chapter 7 trustee compensation; (3) other administrative expense claims under 11 U.S.C. § 503; (4) other priority claims in the order specified in 11 U.S.C. § 507(a) including post-petition tax claims allowed under 11 U.S.C. § 1305; (5) co-signed consumer debts; (6)

general unsecured claims. Unless otherwise noted, claims within each class shall be paid pro rata. If funds remain after payment of specific monthly payments provided for in the plan, the Chapter 13 trustee may distribute those funds to secured creditors in payment of their allowed secured claims.

3. **SECTION 1326(a) PRE-CONFIRMATION ADEQUATE PROTECTION PAYMENTS AND LEASE PAYMENTS.**

The following pre-confirmation adequate protection payments on claims secured by personal property and pre-confirmation lease payments for leases of personal property shall be paid by the trustee to the below listed creditors without entry of an order of the Court. The Debtor proposing pre-confirmation payments will immediately commence plan payments to the trustee. Creditors must file a proof of claim to receive payment. Payments by the trustee shall commence to these creditors within 30 days of the filing of the proof of claim unless the trustee does not have funds available within seven working days prior to the end of the 30-day period. Post-confirmation payments are provided for below in Paragraphs 6 and 7 of this plan.

Creditor's Name and Full Address	Last Four Digits of Account Number	Date of Next Payment Due	Payment Amount
1.			\$
2.			\$
3.			\$

4. **ADMINISTRATIVE CLAIMS.**

Trustee fees shall be deducted from each payment disbursed by the trustee.

[Neb. R. Bankr. P. 2016-1\(A\)\(4\)](#) and [Appendix "K"](#) provide for the maximum allowance of Chapter 13 attorney fees and expenses which may be included in a Chapter 13 plan. Total fees or costs in excess of this amount must be approved through a separate fee application. Fees and costs requested for allowance are as follows:

Total Fees Requested	Fees Received Prior to Filing	Balance of Fees to be Paid in Plan
\$	\$	\$
Total Costs Requested	Costs Received Prior to Filing	Balance of Costs to be Paid in Plan
\$	\$	\$

Fees and costs allowed shall be paid at the rate of not less than \$ _____ per month and shall accrue from the month in which the case is filed.

5. **PRIORITY CLAIMS.**

11 U.S.C. § 1322(a) provides that all claims entitled to priority under 11 U.S.C. § 507(a) shall be paid in full in deferred cash payments unless the holder of a particular claim agrees to a different treatment of such claim except for a priority claims under 11 U.S.C. § 507(a)(1)(B). It is further provided that any and all pre-petition penalties, and post-petition penalties and interest, which have attached or will be attached to any such claim, shall be treated as a general unsecured claim and not entitled to priority. Such claims are as follows:

(A) **Domestic Support Obligations:**

- (1) None. [If none, skip to Priority Taxes section.]
- (2) Name of Debtor who owes Domestic Support Obligation: _____.
- (3) The names(s), address(es), and phone number(s) of the holder of ANY domestic support obligation as defined in 11 U.S.C. § 101(14)(A):

Name	Address, City, and State	Zip Code	Telephone Number
1.			
2.			
3.			

(4) The Debtor is required to pay all post-petition Domestic Support Obligations directly to the holder of the claim and not through the Chapter 13 plan.

(B) Arrearages Owed to Domestic Support Obligation Holders Under 11 U.S.C. § 507(a)(1)(A):

(1) None. [If none, skip to subparagraph C below.]

(2) Name of holder of Domestic Support Obligation Arrearage Claim, estimated arrears and monthly payment:

Name of Creditor	Estimated Arrearage Claim	Monthly Payment on Arrearage
1.	\$	\$
2.	\$	\$
3.	\$	\$

(C) Domestic Support Obligations Assigned to or Owed to a Governmental Unit Under 11 U.S.C. § 507(a)(1)(B):

(1) None. [If none, skip to Priority Tax Claims.]

(2) Name of Creditor, estimated arrearage claim and any special payment provisions:

Name of Creditor	Estimated Arrearage Claim	Provision for Payment
1.	\$	\$

(D) Priority Tax Claims Including Post-Petition Tax Claims Allowed Under 11 U.S.C. § 1305:

Federal: \$	State: \$	Total: \$
-------------	-----------	-----------

(E) Chapter 7 Trustee Compensation Allowed Under §1326(b)(3):

Amount Allowed	Monthly Payment (greater of \$25.00 or 5% of monthly payment to unsecured creditors)
\$	\$

(F) Other Priority Claims: _____

6. **SECURED CLAIMS.**

(A)(1) Home Mortgage Claims (including claims secured by real property which the Debtor intends to retain). Unless otherwise provided in this plan, Debtor shall pay all post-petition mortgage payments directly to each mortgage creditor as those payments ordinarily come due beginning with the first due date after the case is filed and such creditor shall retain any lien securing its claim. Any pre-petition arrearage shall be paid through this Chapter 13 plan with interest as provided below and in equal monthly payments as specified below. The amount of pre-petition arrears is determined by the proof of claim, subject to the right of the Debtor to object to the amount set forth in the claim.

Name of Creditor	Property Description	Estimated Pre-petition Arrearage	Pre-confirmation Interest Rate and Dollar Amount Limit, if Any	Post-confirmation Interest Rate	Monthly Payment Amount on Pre-petition Arrears	Total Payments on Pre-petition Arrears Plus Interest
1.		\$	___% \$	___%	\$	\$
2.		\$	___% \$	___%	\$	\$
3.		\$	___% \$	___%	\$	\$

(A)(2) The following claims secured by real property shall be paid in full through the Chapter 13 plan:

Name of Creditor	Property Description	Pre-confirmation Interest Rate and Dollar Amount Limit, if Any	Post-confirmation Interest Rate	Monthly Payment Amount	Total Payments Plus Interest
1.		___% \$	___%	\$	\$
2.		___% \$	___%	\$	\$

(B) Post-Confirmation Payments to Creditors Secured by Personal Property. Post-confirmation payments to creditors holding claims secured by personal property shall be paid as set forth in subparagraphs (1) and (2). If the Debtor elects a different method of payment, such provision is set forth in subparagraph (3).

- (1) Secured Claims to Which § 506 Valuation is NOT Applicable: Claims listed in this subsection are debts secured by a purchase-money security interest in a personal motor vehicle, incurred within 910 days of filing of the bankruptcy OR debts secured by a purchase-money security interest in “any other thing of value,” incurred within one year prior to filing of the bankruptcy. These claims will be paid in full with interest as provided below and in equal monthly payments as specified below:

Name of Creditor	Property Description	Estimated Claim Amount	Pre-confirmation Interest Rate and Dollar Amount Limit, if Any	Post-confirmation Interest Rate	Monthly Payment Amount	Total Payments Plus Interest
1.		\$	___% \$	___%	\$	\$
2.		\$	___% \$	___%	\$	\$
3.		\$	___% \$	___%	\$	\$

- (2) Secured Claims to Which § 506 Valuation is Applicable: Claims listed in this subsection are debts secured by personal property not described in the prior paragraph of this plan, 6(B)(1). These claims will be paid either the value of the secured property or the amount of the claim, whichever is less, with interest as provided below and in equal monthly payments as specified below. The portion of a claim that exceeds the value of the secured property will be treated as an unsecured claim. The value of the secured property is determined by the proof of claim, subject to the right of the Debtor to object to such valuation.

Name of Creditor	Property Description	Estimated Value of Security or Amount Owed (use lowest amount)	Pre-confirmation Interest Rate and Dollar Amount Limit, if Any	Post-confirmation Interest Rate	Monthly Payment Amount	Total Payments Plus Interest
1.		\$	___% \$	___%	\$	\$
2.		\$	___% \$	___%	\$	\$
3.		\$	___% \$	___%	\$	\$

- (3) Other Provisions:

(C) Surrender of Property. The Debtor surrenders any interest in the following collateral. Any secured

claim filed by the below creditors will be deemed satisfied in full through surrender of the collateral. Any unsecured deficiency claim must be filed by the bar date for claims or allowed by separate order of the Court.

Name of Creditor	Collateral to be Surrendered
1.	
2.	

(D) Lien Avoidance. The Debtor shall file a Motion to Avoid the lien of the following creditor(s):

Name of Creditor	Amount Owed	Property Upon Which Debtor Will Seek to Avoid Lien
1.	\$	
2.	\$	

7. **EXECUTORY CONTRACTS/LEASES.**

(A) The Debtor rejects the following executory contracts:

Name of Creditor	Property Subject to Executory Contract
1.	
2.	

(B) The Debtor assumes the executory contract/lease referenced below and provides for the regular contract/lease payment to be included in the Chapter 13 plan. Any pre-petition arrearage will be cured in monthly payments as noted below:

Name of Creditor	Property Subject to Executory Contract/Lease	Estimated Arrearages on Contract as of Date of Filing	Monthly Payment to be Made on Contract Arrearage	Regular Number of Contract Payments Remaining as of Date of Filing	Amount of Regular Contract Payment	Due Date of Regular Contract Payment	Total Payments (arrears plus regular contract payments)
1.		\$	\$		\$		\$
2.		\$	\$		\$		\$

8. **CO-SIGNED UNSECURED DEBTS.**

(A) The following co-signed debts shall be paid in full at the contract rate of interest from petition date.

Name of Creditor	Estimated Amount Due	Contract Rate of Interest	Total Due
1.	\$	___%	\$

9. **UNSECURED CLAIMS.**

(A) Allowed unsecured claims shall be paid pro rata from all remaining funds.

10. **ADDITIONAL PROVISIONS.**

(A) If there are no resistances/objections to confirmation of this plan or after all objections are resolved, the Court may confirm the plan without further hearing.

(B) Property of the estate, including the Debtor's current and future income, shall re-vest in the Debtor at the time a discharge is issued, and the Debtor shall have sole right to use and possession of property of the estate during the pendency of this case.

(C) In order to obtain distributions under the plan, a creditor must file a proof of claim within 90 days after the first date set for the meeting of creditors except as provided in 11 U.S.C. § 502(b)(9). Claims filed after this bar date shall be disallowed except as provided in Bankruptcy Rule 3002.

(D) Unless otherwise provided in this plan or ordered by the Court, the holder of each allowed secured claim provided for by the plan shall retain its lien securing such claim as provided in 11 U.S.C. § 1325(a)(5)(B).

(E) After the bar date to file a proof of claim for non-governmental units passes, limited notice/service is approved for all post confirmation pleadings. Pleadings shall include applications for fees, amended plans and motions. Pleadings shall be served on all parties in interest. For purposes of this limited notice provision, a party in interest is a party whose interest is directly affected by the motion, a creditor who has filed a proof of claim, a party who has filed a request for notice, any governmental agency or unit that is a creditor and all creditors scheduled as secured or priority creditors. Any pleading filed with limited notice shall include a certificate of service specifically stating it was served with limited notice on all parties in interest pursuant to Neb.R.Bankr.P. 9013-1(E)(1). **Failure to comply shall result in deferral of the motion until a proper certificate of service is filed.**

NOTICE OF RESISTANCE DEADLINE

ANY RESISTANCE TO THIS PLAN OR REQUEST FOR A HEARING MUST BE FILED IN WRITING WITH THE BANKRUPTCY CLERK'S OFFICE (SEE ORIGINAL NOTICE OF BANKRUPTCY FOR ADDRESS) AND SERVED ON THE ATTORNEY FOR THE DEBTOR AT THE ADDRESS LISTED BELOW (OR SERVED ON THE DEBTOR, IF NOT REPRESENTED BY AN ATTORNEY), ON OR BEFORE:

(USE OPTION A OR B – SEE LOCAL COURT RULES)

(A) **14 DAYS AFTER THE CONCLUSION OF THE MEETING OF CREDITORS**
OR

(B) **MONTH, DAY AND YEAR** (USE A CALENDAR DATE WHICH IS AT LEAST 21 DAYS AFTER THE DATE THE PLAN IS FILED WITH THE COURT)

IF A TIMELY RESISTANCE OR REQUEST FOR A HEARING IS FILED AND SERVED, THE BANKRUPTCY COURT WILL HANDLE THE RESISTANCE IN ACCORDANCE WITH [NEB. R. BANKR. P. 3015-2](#). IF THERE ARE NO OBJECTIONS TO THE PLAN AS FILED, THE COURT MAY CONFIRM THE PLAN WITHOUT FURTHER HEARING.

CERTIFICATE OF SERVICE

On _____, 20__ , the undersigned mailed a copy of this plan to all creditors, parties-in-interest, and those requesting notice by regular United States mail, postage prepaid. The parties to whom notice was mailed are either listed below or on the attached mailing matrix. The undersigned relies on the CM/ECF system of the United States Bankruptcy Court to provide service to the following: Kathleen A Laughlin, Chapter 13 trustee.

DATED: _____.

Debtor(s)

By: /s/ _____
Attorney for the Debtor(s)

Attorney Number: _____

Attorney Address: _____

Attorney City, State, Zip: _____

Attorney Phone Number: _____

Attorney Fax Number: _____

Attorney Email Address: _____

APPENDIX "H"
CERTIFICATION BY DEBTOR IN SUPPORT OF CONFIRMATION

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF NEBRASKA

IN THE MATTER OF: _____)
)
)
)
 Debtor(s).)

CASE NO. BK _____

Chapter _____

CERTIFICATION BY DEBTOR
IN SUPPORT OF CONFIRMATION

With regard to the Chapter 13 or 12 plan/amended plan filed on _____, I certify that:

(ONE OF THE PARAGRAPHS BELOW MUST BE CHECKED)

_____ Since the filing of this bankruptcy, I have not been required by a judicial or administrative order or by statute to pay any domestic support obligation as defined in 11 U.S.C. § 101(14A).

OR

_____ I have paid all amounts that first became due and payable after the filing of this bankruptcy which I am required to pay under a domestic support obligation (as defined in 11 U.S.C. § 101(14A)) required by a judicial or administrative order or by statute.

I declare under penalty of perjury that the foregoing certification is true and correct.

DATED: _____.

Debtor

Joint Debtor

UNITED STATES BANKRUPTCY COURT

_____ District Of _____

In re _____
Debtor

Case No. _____

CHAPTER 13 DEBTOR'S CERTIFICATIONS REGARDING DOMESTIC SUPPORT OBLIGATIONS AND SECTION 522(q)

Part I. Certification Regarding Domestic Support Obligations (check no more than one)

Pursuant to 11 U.S.C. Section 1328(a), I certify that:

- I owed no domestic support obligation when I filed my bankruptcy petition, and I have not been required to pay any such obligation since then.
- I am or have been required to pay a domestic support obligation. I have paid all such amounts that my chapter 13 plan required me to pay. I have also paid all such amounts that became due between the filing of my bankruptcy petition and today.

Part II. If you checked the second box, you must provide the information below.

My current address: _____

My current employer and my employer's address: _____

Part III. Certification Regarding Section 522(q) (check no more than one)

Pursuant to 11 U.S.C. Section 1328(h), I certify that:

- I have not claimed an exemption pursuant to § 522(b)(3) and state or local law (1) in property that I or a dependent of mine uses as a residence, claims as a homestead, or acquired as a burial plot, as specified in § 522(p)(1), and (2) that exceeds \$160,375* in value in the aggregate.
- I have claimed an exemption in property pursuant to § 522(b)(3) and state or local law (1) that I or a dependent of mine uses as a residence, claims as a homestead, or acquired as a burial plot, as specified in § 522(p)(1), and (2) that exceeds \$160,375* in value in the aggregate.

* Amounts are subject to adjustment on 4/01/19, and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

Part IV. Debtor's Signature

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

Executed on _____
Date

Debtor



Official Form 121

Statement About Your Social Security Numbers

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Tell the Court About Yourself and Your spouse if Your Spouse is Filing With You

Form with two columns: 'For Debtor 1:' and 'For Debtor 2 (Only If Spouse Is Filing):'. Section 1: Your name. Fields for First name, Middle name, Last name.

Part 2: Tell the Court About all of Your Social Security or Federal Individual Taxpayer Identification Numbers

Section 2: All Social Security Numbers you have used. Fields for SSN (MM-SS-SSSS) and checkbox 'You do not have a Social Security number.'

Section 3: All federal Individual Taxpayer Identification Numbers (ITIN) you have used. Fields for ITIN (9-SS-SS-SSSS) and checkbox 'You do not have an ITIN.'

Part 3: Sign Below

Under penalty of perjury, I declare that the information I have provided in this form is true and correct.

Under penalty of perjury, I declare that the information I have provided in this form is true and correct.

X Signature of Debtor 1

X Signature of Debtor 2

Date MM / DD / YYYY

Date MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
 (If known)

Check if this is an amended filing

Official Form 103A

Application for Individuals to Pay the Filing Fee in Installments

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: Specify Your Proposed Payment Timetable

1. Which chapter of the Bankruptcy Code are you choosing to file under?

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

2. You may apply to pay the filing fee in up to four installments. Fill in the amounts you propose to pay and the dates you plan to pay them. Be sure all dates are business days. Then add the payments you propose to pay.

You must propose to pay the entire fee no later than 120 days after you file this bankruptcy case. If the court approves your application, the court will set your final payment timetable.

You propose to pay...

\$ _____	<input type="checkbox"/> With the filing of the petition	_____
	<input type="checkbox"/> On or before this date.....	MM / DD / YYYY
\$ _____	On or before this date.....	_____
		MM / DD / YYYY
\$ _____	On or before this date.....	_____
		MM / DD / YYYY
+ \$ _____	On or before this date.....	_____
		MM / DD / YYYY

Total \$ _____

◀ Your total must equal the entire fee for the chapter you checked in line 1.

Part 2: Sign Below

By signing here, you state that you are unable to pay the full filing fee at once, that you want to pay the fee in installments, and that you understand that:

- You must pay your entire filing fee before you make any more payments or transfer any more property to an attorney, bankruptcy petition preparer, or anyone else for services in connection with your bankruptcy case.
- You must pay the entire fee no later than 120 days after you first file for bankruptcy, unless the court later extends your deadline. Your debts will not be discharged until your entire fee is paid.
- If you do not make any payment when it is due, your bankruptcy case may be dismissed, and your rights in other bankruptcy proceedings may be affected.

x _____ Signature of Debtor 1	x _____ Signature of Debtor 2	x _____ Your attorney's name and signature, if you used one
Date _____ MM / DD / YYYY	Date _____ MM / DD / YYYY	Date _____ MM / DD / YYYY

Fill in this information to identify the case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____
(If known)

Chapter filing under:
 Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Order Approving Payment of Filing Fee in Installments

After considering the *Application for Individuals to Pay the Filing Fee in Installments* (Official Form 103A), the court orders that:

The debtor(s) may pay the filing fee in installments on the terms proposed in the application.

The debtor(s) must pay the filing fee according to the following terms:

You must pay... **On or before this date...**

\$ _____ _____
Month / day / year

\$ _____ _____
Month / day / year

\$ _____ _____
Month / day / year

+ \$ _____ _____
Month / day / year

Total

\$ _____

Until the filing fee is paid in full, the debtor(s) must not make any additional payment or transfer any additional property to an attorney or to anyone else for services in connection with this case.

Month / day / year

By the court: _____
United States Bankruptcy Judge

SAMPLE MAILING MATRIX

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEBRASKA

Rentrax
PO Box 18888
Portland OR 97218

Yellow Pages
PO Box 2775
McAllen TX 78502

Software Solutions
751 North Lincoln
Fremont NE 68025

Sight & Sound
2055 Walton Road
St. Louis MO 63114

Brentwood Bank
8004 South 48th St.
LaVista NE 68128

AI Thrower
406 Lawrence Lane
Bellevue NE 68005

US West Communications
PO Box 737
Des Moines IA 50338

TMC Long Distance
7000 West Center Road
Ste. 402
Omaha NE 68106

Omaha Public Power
444 So. 16th St. Mall
Omaha NE 68102

Sarpy County Treasurer
Courthouse
Papillion NE 68046

Sarpy County Attorney
Courthouse
Papillion NE 68046

Payment Methods

Cash

Effective May 1, 2012, the US Bankruptcy Court for the District of Nebraska will no longer accept cash.

Checks

The US Bankruptcy Court for the District of Nebraska will only accept checks from attorneys¹. Debtors-In-Possession (DIP) may pay using an official business check².

Credit Cards/ACH

The US Bankruptcy Court for the District of Nebraska now has the ability to accept payments by Credit/Debit Cards or Automatic Clearing House (ACH). The Court can accept all major credit cards. Both convenient methods of payment are processed by Pay.gov.

ACH is a direct debit method in which the payment comes directly out of a checking account. No card number is needed. You will only need to provide a bank routing and account number. This is a great hassle-free way of making a payment.

Money Order/Cashier's Check

The US Bankruptcy Court for the District of Nebraska accepts Money Orders and Cashier's Checks.

<i>Payee</i>	<i>Acceptable Methods of Payment</i>
Attorneys	Credit/Debit Card; Check
Debtors	Cashier's Check or Money Order
Debtors-In-Possession	Business Check; Cashier's Check; Money Order
Non-Debtors/Closed-Case Debtors	Credit/Debit Card; Cashier's Check; Money Order

¹ Checks will be accepted from attorneys filing on behalf of clients. Checks may not be accepted on behalf of their own filing. Checks may be refused and an additional payment method may be requested at any time.

² The official name of the DIP must be imprinted on the official check. Checks may be refused and an additional payment method may be requested at any time.

**U.S. BANKRUPTCY COURT
DISTRICT OF NEBRASKA**

In re: _____ Debtor(s) Case No. _____

DEBTOR'S ELECTRONIC NOTICING REQUEST (DeBN)

CHECK ONLY ONE BOX FOR THE APPLICABLE SECTION BELOW:

<input type="checkbox"/>	<u>INITIAL REQUEST:</u> (Check this box to begin receiving notices and orders from the U.S. Bankruptcy Court via email)
<p>Pursuant to Federal Rules of Bankruptcy Procedure 9036, I hereby request receipt of court notices and orders via email, instead of U.S. mail, from the Bankruptcy Noticing Center (BNC) through the U.S. Bankruptcy Court's Debtor Electronic Bankruptcy Noticing (DeBN) program.</p> <p>I understand that this request is limited to receipt of only notices and orders filed by the U.S. Bankruptcy Court. I will continue to receive documents filed by all other parties, such as the trustee and creditors, via U.S. mail or in person pursuant to court rules.</p> <p>I understand that I will receive electronic notice of any documents filed by the court in any current or future bankruptcy or adversary case from any bankruptcy court district in which I am listed with the same name and address, including cases where I am listed as a creditor.</p> <p>I understand that the first time the BNC receives an email bounce-back (undeliverable email), my DeBN account will be automatically disabled. I will then receive notices and orders via U.S. mail, and I must file an updated request form if I wish to reactivate my account.</p> <p>I understand that enrollment in DeBN is completely voluntarily, and I may file a request to deactivate my account at any time.</p> <p>I understand that if I already have an active electronic noticing account, that account will be deactivated by creating this DeBN account.</p>	

<input type="checkbox"/>	<u>UPDATE TO ACCOUNT INFORMATION:</u> (Check this box to make changes to your existing DeBN account)
<p>I request the following update(s) to my DeBN account:</p> <p><input type="checkbox"/> I have a new email address as indicated below.</p> <p><input type="checkbox"/> I filed a new bankruptcy case, and I have an existing DeBN account. Please review my account to ensure my name and address in my account match this new case.</p> <p><input type="checkbox"/> I request reactivation of my DeBN account so that I may receive court notices and orders via email, instead of U.S. mail.</p>	

<input type="checkbox"/>	<u>REQUEST TO DEACTIVATE ELECTRONIC NOTICING:</u> (Check this box to request deactivation of your DeBN account)
<p>I request deactivation of my DeBN account. I understand that by deactivating my account, I will begin receiving notices and orders filed by the U.S. Bankruptcy Court via U.S. mail, instead of email.</p> <p>I understand that I will continue to receive electronic notices until such time as the Court has deactivated my account.</p>	

I am a debtor in this bankruptcy case, or the debtor's authorized representative if the debtor is a business, and I have read the applicable section check-marked above and understand and agree to the terms and conditions set forth therein. I certify under perjury that the information I am submitting to register for electronic notice is true and correct. Neither the U.S. Bankruptcy Court nor the BNC bears any liability for errors resulting from the information I have submitted on this form.

NOTE: Joint debtors and debtors who already have a DeBN account must file separate request forms for an initial request, account updates and to request account deactivation.

Signature: _____ Date: _____

Printed Name (and title if not the debtor): _____

Email Address (type or print clearly): _____

Enter Email address again: _____

For more information about the DeBN program, visit the Court's website at: www.neb.uscourts.gov

How Do I Request DeBN?

1. Go to the court's website to complete the request form:
www.neb.uscourts.gov
2. Debtors can file a DeBN request form through their attorney electronically, on their own by USPS mail, by email to DeBN@neb.uscourts.gov or present the completed form at the Clerk's Office.
3. The clerk's office creates your account.

Activation of your account is now complete, and you will receive a confirmation email from the BNC.

From this point forward, all applicable notices and orders filed by the court will be delivered to you via email, as long as your name and address in the bankruptcy case match your name and address in your DeBN account and there are no email transmission failures.

Keep the Court Advised by Filing an Updated Request Form if You:

- Change your email address;
- File a new case after enrolling in DeBN (so the court can make sure your name and address in your DeBN account match your new case); or
- Wish to deactivate or reactivate your account.

Advantages of DeBN:

- **Faster** — You'll receive notices the same day they are filed by the court.
- **Convenient** — Access your notices anywhere you have internet access.
- **No more lost paperwork** — Storing notices on your computer means never losing a paper copy.
- **Less paper clutter** — Helps the environment and reduces paper clutter in your home.
- **It is FREE!**

If you have any questions about the DeBN program, or to file your request form, contact the Clerk's Office:

Omaha:

U.S. Bankruptcy Court
District of Nebraska
Roman L. Hruska U.S. Courthouse
111 S. 18th Plaza, Suite 1125
Omaha, NE 68102
Phone: 402-661-7444

Lincoln:

U.S. Bankruptcy Court
District of Nebraska
Robert V. Denney Federal Building
and U.S. Courthouse
100 Centennial Mall North, Room 460
Lincoln, NE 68508
Phone: 402-437-1625

Court Email: DeBN@neb.uscourts.gov

Debtor Electronic Bankruptcy Noticing

Email Delivery of Notices and Orders

- ▶ Signing up is **EASY!**
- ▶ **Faster than mail**
- ▶ **Earth-friendly**
- ▶ **Convenient**
- ▶ **It's FREE!**



United States Bankruptcy Court
District of Nebraska

What is DeBN?

DEBTOR ELECTRONIC BANKRUPTCY NOTICING (DeBN) is a FREE and voluntary service that allows debtors to request delivery of applicable court notices and orders from the bankruptcy court, through the BNC, via email instead of U.S. mail.

Who is the BNC?

The **BANKRUPTCY NOTICING CENTER** (BNC) provides services to the bankruptcy court by sending court notices and orders to the parties by either mail or email.

What are Court Notices and Orders?

Court notices and orders refer to the documents filed by the bankruptcy court, which may include, but are not limited to, the following:

- **Notice of Meeting of Creditors**
(Provides the date/time/location of the 341 meeting)
- **Notice of Requirement For Financial Management Course**
- **Order Discharging Debtor**

Who Will Serve Me via Email?

By enrolling in DeBN, a debtor consents ONLY to service of court notices and orders filed by the bankruptcy court. The BNC, on the bankruptcy court's behalf, will prepare and send the emails.

No other parties, such as creditors and trustees, are allowed to use the DeBN program to email debtors—all other parties will continue to serve documents upon the debtor via U.S. mail.

Length of Enrollment in DeBN:

A DeBN account remains active, unless:

- 1) Debtor's account is automatically disabled due to an email transmission failure (email bounce-back); or
- 2) Debtor files a request to deactivate the account. A debtor may file this request at any time.

As long as the debtor's DeBN account is active, all applicable court notices and orders will be emailed to the debtor by the BNC in **any bankruptcy or adversary case from any district** in which the debtor's name and address matches the name and address in the debtor's DeBN account. This name/address match includes cases where the debtor may be listed as a creditor.

How it Works:

Once the debtor files a DeBN request form, the clerk's office creates the DeBN account. Immediately thereafter, when the court files a notice or order and sends it to the BNC for service upon the debtor, the BNC will email the notice to the debtor at the end of the day. The court notice or order will be emailed as a single PDF attachment, and a separate email will be sent for each court notice or order that has been filed. **Note: The debtor receives only those notices/orders that the court serves upon the debtor.**

There is no limit to the number of times the debtor may view the PDF attachment, print the attachment, save it to his or her computer, or simply retain the email for viewing at any time.

If the PDF attachment exceeds 8 MB, the notice will be sent to the debtor by U.S. mail instead of email.

