Fill in this in	formation to ide	ntify your case:	
Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	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

04/20

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).

Pa	art 1: Calculate Your Average Monthly Income	1						
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 bankruptcy case. 11 U.S.C. § 101(10A). For example, if you have not include any income amount more than one from that property in one column only. If you have nothing to	ou are filing or ring the 6 mo ice. For exar	on Septembe onths, add the mple, if both s	er 15, the e income spouses o	6-month period wou for all 6 months and own the same rental	ld be March 1 through divide the total by 6. Fill in		
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
2.	<ol> <li>Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).</li> </ol>				\$	\$		
3.	Alimony and maintenance payments. Do not include pay	ments from	a spouse.		\$	\$		
4.	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	Debtor 1	Debtor 2					
	Gross receipts (before all deductions)	\$	\$					
	Ordinary and necessary operating expenses	- \$	- \$					
	Net monthly income from a business, profession, or farm	\$	\$	Copy here	\$	\$		
6.	Net income from rental and other real property	Debtor 1	Debtor 2					
	Gross receipts (before all deductions)	\$	\$					
	Ordinary and necessary operating expenses	<b>-</b> \$	- \$					
	Net monthly income from rental or other real property	¢	¢	Сору	Φ.	¢		

Dobtor 1		

Middle Name

Last Name

First Name

Case number (if known)\_\_\_\_\_

		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. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$	\$	
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; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.			
		\$		
		\$	_ \$	
	Total amounts from separate pages, if any.	<b>+</b> \$	+ \$	
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
P	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 you or your dependents, such as payment of the spouse's tax liability or the spouse you or your dependents.	e's support of som	neone other than	
	Below, specify the basis for excluding this income and the amount of income devote list additional adjustments on a separate page.	ed to each purpos	se. If necessary,	
	If this adjustment does not apply, enter 0 below.			
		\$		
		\$		
		+ \$	<u>—</u>	
	Total	. \$	Copy here	
			50p, 2	

De	btor 1	First Name	Middle Ness	Last Name		Case number (if known)	
		First Name	Middle Name	Last Name			
14.	You	r current monthly	income. Subtra	act the total in line	3 from line 12.		\$
15.	Calc	ulate your curren	t monthly inco	me for the year. Fo	ollow these steps:		
	15a.	Copy line 14 here	<b>→</b>				\$
		Multiply line 15a b	y 12 (the numbe	er of months in a ye	ar).		<b>x</b> 12
	15b.	The result is your o	current monthly	income for the year	for this part of the form		\$
16.	Calc	ulate the median	family income	that applies to yo	J. Follow these steps:		
	16a.	Fill in the state in	which you live.				
	16b.	Fill in the number	of people in you	ur household.			
	160	Fill in the median	family income for	or vour state and si	ze of household		
	100.	To find a list of ap	plicable median	income amounts,	go online using the link specification of the bankruptcy clerk's	fied in the separate	\$
17.	How	do the lines com	pare?				
	17a.					neck box 1, <i>Disposable income i</i> posable Income (Official Form 1	
	17b.	11 U.S.C. § 1	325(b)(3). <b>Go to</b>	Part 3 and fill ou		, Disposable income is determir sable Income (Official Form 1	
De	rt 3:	Coloulata	Your Commi	twent Deried III	nder 11 U.S.C. § 1325(b)	(4)	
Ге	i ( ).	Calculate	Tour Commi	tillent Feriou Oi	10.5.0. 3 1323(b)	(-)	
18.	Сору	your total avera	ge monthly inc	ome from line 11.			s
19.	calcu	uct the marital adulating the commitremount from line 13	ment period und	<b>pplies.</b> If you are mer er 11 U.S.C. § 132	arried, your spouse is not filin 5(b)(4) allows you to deduct p	ng with you, and you contend th part of your spouse's income, co	opy
	19a.	If the marital adjust	stment does not	apply, fill in 0 on li	ne 19a		
	19b.	Subtract line 19a	a from line 18.				\$
20.	Calc	ulate your curren	t monthly inco	me for the year. F	ollow these steps:		
	20a.	Copy line 19b					
		Multiply by 12 (the	e number of mo	nths in a year).			\$ <b>x</b> 12
	20b.	The result is your	current monthly	income for the yea	r for this part of the form.		\$
							,
	20c. (	Copy the median f	amily income for	r your state and siz	e of household from line 16c.		\$
21.	How	do the lines com	pare?				
		ine 20b is less tha The commitment po			ed by the court, on the top of	page 1 of this form, check box 3	3,

tor 1			Case number (if known)	
First Name	Middle Name	Last Name		
] . : 20h : 4	h 1 d - 1 i'm	20 - Halana athamaisa andana	d but the count on the top of your 4 of this forms	
		ne 20c. Unless otherwise ordered o <i>d is 5 years</i> . Go to Part 4.	d by the court, on the top of page 1 of this form,	
CHECK DOX 4, THE	John Millent peno	d is 3 years. Go to Fait 4.		
rt 4: Sign Belov	٧			
rt 4: Sign Belov	v			
		v of porium I declare that the infe	promotion on this statement and in any attachments is true and corre	.ct
		γ of perjury I declare that the info	ormation on this statement and in any attachments is true and corre	ect.
		r of perjury I declare that the info	ormation on this statement and in any attachments is true and corre	oct.
By signing h	ere, under penalty	/ of perjury I declare that the info	*	ect.
By signing h		/ of perjury I declare that the info		ct.
By signing h	ere, under penalty	/ of perjury I declare that the info	Signature of Debtor 2	ect.
By signing h  Signature  Date	ere, under penalty	/ of perjury I declare that the info	*	ect.

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.