United States Bankruptcy Court

Central District of California

Chapter 13 Petition Package

Requirements and Forms for Individuals Filing a Chapter 13 Bankruptcy Case in the Central District of California

Revised April 1, 2025

Check the Court's website <u>www.cacb.uscourts.gov</u> to verify that you are using the latest version of the Petition Package



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Introduction

This Chapter 13 Petition Package includes the basic information and forms required to file a voluntary chapter 13 bankruptcy case in the Central District of California, as specified in <u>The Central Guide Section 1-06</u>. Individual debtors should also refer to the *Instructions for Bankruptcy Forms for Individuals*, available on the Court's website under Petition Forms. Since bankruptcy is a complex process, debtors considering filing a chapter 13 bankruptcy case are encouraged to consult with a bankruptcy attorney. Only individuals may file chapter 13 bankruptcy cases [11 U.S.C. § 109].

This Petition Package, and all forms in it, are available for free on the Court's web site <u>http://www.cacb.uscourts.gov</u>. The online versions of the forms in this Petition Package are pdf fillable and can be completed and saved to any computer that has Adobe Acrobat Reader (Adobe Acrobat Reader is available for free at <u>http://get.adobe.com/reader</u>).

Please note that court staff is prohibited from giving legal advice.

Before filing a bankruptcy case, debtors are also encouraged to visit the Court's web site <u>www.cacb.uscourts.gov</u> to review the "Don't Have an Attorney" web page. This web page has easy to understand information and videos about the bankruptcy process and other helpful information.

Attorneys filing through CM/ECF should refer to <u>The Central Guide, Section 1-09</u>.

Requirements for Filing a Chapter 13 Bankruptcy Case

To file a chapter 13 bankruptcy case in the Central District of California, debtors:

 <u>MUST</u> complete an approved credit counseling course within 180 days <u>BEFORE</u> <u>filing</u> the bankruptcy case. Upon completion of the credit counseling course, a certificate of completion will be issued. A copy of the certificate of completion must be filed with the court up to 14 days after the bankruptcy petition filing (with limited exceptions).

For a list of approved credit counseling agencies, visit the U.S. Department of Justice's website at <u>www.justice.gov/ust/eo/bapcpa/ccde/cc_approved.htm</u>.

- 2) **<u>MUST</u>** pay the chapter 13 filing fee. Consult <u>The Central Guide</u> for the filing fee amount and payment methods.
- 3) **<u>MUST</u>** file the following documents at the bankruptcy court in the following order.

	At a minimum, documents in this box (A, B, and C) <u>MUST BE FILED</u> , when applicable, or the bankruptcy filing will not be accepted.	
A. 🗌	<u>Statement About Your Social Security Numbers</u> (Official Form 121) If filing electronically, see <u>The Central Guide</u> , <u>Section 1-09</u> , TCG Supplement, Paragraph 1.6(b). If filing electronically, this document <i>must</i> be filed separately from the other documents in this package.	
В. 🗌	Voluntary Petition for Individuals Filings for Bankruptcy (Official Form 101) – this completed form must be signed by the debtor(s).	
C. 🗌	<u>Master Mailing List of Creditors</u> - this is not a form, it is a list of creditors' names and addresses. Please see the <i>Requirements for Master Mailing List of Creditors</i> on page 9.	
D. 🗌	Initial Statement About an Eviction Judgment Against You (Official Form 101A) – this form must be filed with your Voluntary Petition <i>IF</i> you marked "Yes" to both questions in #11 on the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). The Court requires that filers of this statement also provide a copy of the eviction judgment and a check made payable to the landlord.	

<u>The Following Documents Must be Filed with the Voluntary Petition or</u> <u>within 14 Days After Filing the Voluntary Petition</u>

The following documents, if applicable, MUST also be filed at the bankruptcy court with the Voluntary Petition, or within 14 days after the filing of the Voluntary Petition. If the following documents are not filed within 14 days after the filing of the Voluntary Petition, the bankruptcy case may be dismissed. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you.

- E. Debt Repayment Plan if the credit counseling agency provided the debtor with a debt repayment plan, the debt repayment plan must be filed.
- F. Statement of Related Cases (LBR form F 1015-2.1.STMT.RELATED.CASES)
- G. Summary of Your Assets and Liabilities and Certain Statistical Information (Official Form 106Sum)
- H. Schedules A/B through J-2
 - Schedule A/B: Property (Official Form 106A/B)
 - Schedule C: The Property You Claim as Exempt (Official Form 106C)
 - Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)
 - Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)
 - Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G)
 - Schedule H: Your Codebtors (Official Form 106H)
 - Schedule I: Your Income (Official Form 106I)
 - Schedule J: Your Expenses (Official Form 106J)
 - Schedule J-2: Expenses for Separate Household of Debtor 2 (Official Form 106J-2) You must file Official Form 106J-2 if you answered "yes" to both questions on Official Form 106J, Part 1.
- I. Declaration About an Individual Debtor's Schedules (Official Form 106Dec)
- J. Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)
- K. Disclosure of Compensation of Bankruptcy Petition Preparer (Official Form B2800 this form must be filed only if the debtor paid a non-attorney bankruptcy petition preparer to prepare any of the documents in listed in this Petition Package [11 U.S.C. § 110].

- L. Bankruptcy Petition Preparer's Notice, Declaration and Signature (Official Form 119) this form must be filed only if the debtor paid a non-attorney bankruptcy petition preparer prepared any of the bankruptcy filing documents. [11 U.S.C. § 110].
- M. Disclosure of Compensation of Attorney for Debtor (Official Form 2030) this form is required only when an attorney represents the debtor and/or prepared the bankruptcy filing documents.
- N. Declaration by Debtor(s) as to Whether Debtor(s) Income was Received From an Employer withint 60 Days of the Petition Date [11 U.S.C., § 521(a)(1)(B)] (LBR form F 1002-1.EMP.INCOME.DEC) If filing electronically, this document *must* be filed separately from the other documents in this package.
- O. Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1)
- P. Chapter 13 Statement of Your Disposable Income (Official Form 122C-2)
- Q. Verification of Master Mailing List of Creditors [LBR 1007-1(a)] (LBR form F 1007-1.MAILING.LIST.VERIFICATION)
- R. Certificate of Credit Counseling a certificate of credit counseling is issued by the credit counseling agency after the debtor has completed a credit counseling course. If filing electronically, this document *must* be filed separately from the other documents in this package.
- S. Chapter 13 Plan (LBR form F 3015-1.01.CHAPTER13.PLAN) If filing electronically, this document *must* be filed separately from the other documents in this package.

The Following Documents Must be Filed with the Voluntary Petition or within 30 Days After Filing the Voluntary Petition

T. Statement About Payment of an Eviction Judgment Against You (Official Form 101B) – if you filed Official Form 101A (see E), this form must be filed within 30 days after the filing of the Voluntary Petition if the debtor wishes to stay in their residence for more than 30 days after filing the Voluntary Petition.

Optional Form with No Deadline for Filing

U. Debtor's Request to Activate Electronic Noticing (DeBN) (local form F 9036-1.1 DeBN ACTIVATE) – this is an *optional* form for individual debtors to request orders and court-generated notices by email (at no cost) through the DeBN program, instead of by U.S. mail. If filing electronically, this document *must* be filed separately from the other documents in this package.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are 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."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$78	administrative fee
+	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+ \$571		administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy 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.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+ \$78		administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <u>http://www.uscourts.gov/services-forms/bankruptcy/credit-courseling-and-debtor-education-courses</u>.

In Alabama and North Carolina, go to: <u>http://www.uscourts.gov/services-</u> forms/bankruptcy/credit-counseling-anddebtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Requirements for Master Mailing List of Creditors

A Master Mailing List of Creditors, with the names and addresses of the creditors, must be filed in all bankruptcy cases and must be submitted in the following format (see Example of Format for Master Mailing List on the next page):

- 1. Typed on **blank**, unlined, standard white 8-1/2 x 11 inch medium weight paper using **uppercase** and **lowercase** letter quality fonts, no smaller than **10 point** nor greater than **14 point**, in either Arial, Calibri, Cambria, Courier, Times New Roman, Helvetica, Geneva, or Letter Gothic.
- 2. Typed in a single column with no letters closer than 1-1/2 inches from any edge of the paper and left justified.
- 3. Typed with no more than 8 name/address blocks per page. Each block must consist of no more than 4 lines total for each name/address with at least 2 blank lines in between.
- 4. Master Mailing List pages must list the creditors from schedules D, and E/F of the bankruptcy case filing. Use as many pages as needed. **Do not include** the debtor, joint debtor, U.S. Trustee, Internal Revenue Service, or Franchise Tax Board on the Master Mailing List.
- 5. Each line can be no more than 35 characters in length including spaces. The attention line, if any, must be included on the second line of the block. DO NOT INCLUDE ACCOUNT NUMBERS. The city, state (2-letter abbreviation in capital letters only, e.g., CA), and zip code must be on the last line. Nine-digit zip codes should be separated by a hyphen.
- 6. Do not use punctuation, except for one comma between city and state (for example Los Angeles, CA 90012).
- 7. If a separate Equity Holders List is filed, it must comply with the above format requirements.

Example of Format for Master Mailing List of Creditors

Acme Auto Repair 1234 S Street Los Angeles, CA 90005

Acme Hair Repair Attn Herman 1234 S Ave Los Angeles, CA 90005-0001

Acme Dental Clinic 745 Tungsten Boulevard Hollywood, CA 90027

Acme Talent Agency 421 N Copper Canyon Way Burbank, CA 91505-0002

Loans By Acme 7485 Chromium Circle Beverly Hills, CA 90210

Acme And Sons Insurance Attn D Acme 13363 Hierro Street Suite 25 Van Nuys, CA 91401

Acme Bar and Grill 114 Aluminum Alley Chatsworth, CA 91313

Definition of Terms

Automatic Stay – An injunction that automatically stops lawsuits, foreclosures, garnishments, and most collection activities against the debtor the moment a bankruptcy petition is filed.

Bankruptcy Code – The Bankruptcy Code (also referred to as 11 U.S.C.) is the bankruptcy law portion of the United States Code and is available online at <u>http://law.abi.org/</u>.

The Central Guide– The Central Guide serves as the administrative portion of the Local Bankruptcy Rules. It lists all the documents that must be prepared in order to file bankruptcy. The Central Guide also contains other useful information for the public, including filing fees and procedures, telephone numbers, clerical and mechanical rules, and instructions and guides for public access to court dockets, records, and court technology. The Central Guide is available online at https://www.cacb.uscourts.gov/the-central-guide.

Debtor – An individual, a married couple, or a non-individual that has filed a bankruptcy petition.

FRBP – The Federal Rules of Bankruptcy Procedure (FRPB) govern procedures for bankruptcy proceedings and are available online at <u>http://law.abi.org/</u>.

Local Bankruptcy Rules (LBRs) – The Local Bankruptcy Rules, often referred to as LBRs, are a set of procedures and mandatory requirements for bankruptcy cases and proceedings in the Central District of California. LBRs also give parties and their attorneys instructions for getting their requests in front of the judge and list requirements for attorneys, trustees, and other parties who work for a bankruptcy estate. LBRs are available on the Court's website at <u>www.cacb.uscourts.gov/local-rules</u>.

LBR Forms – Local Bankruptcy Rules Forms are approved for use by the Bankruptcy Court for the Central District of California and work in conjunction with the Local Bankruptcy Rules. LBR forms numbers are preceded with the letter "F" followed by the applicable LBR number. LBR forms are available online at <u>www.cacb.uscourts.gov/forms/local_bankruptcy_rules_forms</u>.

Non-Individual – A corporation, partnership, unincorporated association, or trust.

Official Forms – Official Forms are approved for use by the United States Courts for national use and are available at <u>www.uscourts.gov/forms/bankruptcy-forms</u>. Many often used Official Forms are also available on the Court's website at <u>www.cacb.uscourts.gov/forms</u>.

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
District of	State	
Case number (If known):		

Official Form 121 Statement About Your Social Security Numbers

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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.

art 1: Tell the Court /		<u> </u>
	For Debtor 1:	For Debtor 2 (Only If Spouse Is Filing):
Your name		
	First name	First name
	Middle name	Middle name
	Last name	Last name
All Social Security Numbers you have used		
	You do not have a Social Security number.	You do not have a Social Security number.
All federal Individual Taxpayer Identification	9	9
Numbers (ITIN) you have used	9	9
art 3: Sign Below	You do not have an ITIN.	You do not have an ITIN.
	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.
	I have provided in this form is true and correct.	×
	I have provided in this form is true and correct.	I have provided in this form is true and correct.

Statement About Your Social Security Numbers

Fill in this information	to identify your case:
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United States Bankruptcy Court for the:	
	apter 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 06/24

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):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	First name	First name
	your driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting	Last name	Last name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2	All other names you		
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or	Middle name	Middle name
	maiden names and any assumed, trade names and <i>doing business as</i> names.	Last name	Last name
	Do NOT list the name of any	First name	First name
	separate legal entity such as a corporation, partnership, or LLC that is not filing this	Middle name	Middle name
	petition.	Last name	Last name
		Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security	xxx – xx –	xxx – xx –
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9 xx - xx	9 xx - xx

Deptor 1	Debto	r 1
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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer	_	-
	Identification Number	EIN	EIN
	(EIN), if any.		
		<u> </u>	
5.	Where you live		If Debtor 2 lives at a different address:
		Number Street	Number Street
		City State ZIP Code	City State ZIP Code
		County	County
		County	County
		If your mailing address is different from the one	If Debtor 2's mailing address is different from
		above, fill it in here. Note that the court will send	yours, fill it in here. Note that the court will send
		any notices to you at this mailing address.	any notices to this mailing address.
			Number Otrest
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for	Over the last 190 days before filing this patition	Over the last 190 days before filing this patition
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any	Over the last 180 days before filing this petition, I have lived in this district longer than in any
		other district.	other district.
		I have another reason. Explain.	I have another reason. Explain.
		(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)
		((

De	btor 1 First Name Middle Nam		Case number (if known)				
	First Name Middle Nam	e	Last Name				
Pa	art 2: Tell the Court Abou	t Your B	ankruptcy Case				
7.	The chapter of the Bankruptcy Code you			brief description of each, see <i>Notice Required by 11 U.S.C. § 342(b) for Individuals Filing</i> for 2010)). Also, go to the top of page 1 and check the appropriate box.			
	are choosing to file under	🖵 Cha	oter 7				
		🖵 Cha	oter 11				
		🖵 Cha	oter 12				
		🖵 Chaj	oter 13				
8.	How you will pay the fee	local your subr with I nee Appl I req By la less pay	court for more details about how self, you may pay with cash, cas nitting your payment on your beh a pre-printed address. ed to pay the fee in installment ication for Individuals to Pay The uest that my fee be waived (Yo w, a judge may, but is not require than 150% of the official poverty	w you m hier's c half, you s. If you e Filing bu may red to, w line that oose th	ay pay. Typicall heck, or money ir attorney may p u choose this op Fee in Installme request this optivaive your fee, a at applies to you is option, you m	order. If your attorney is bay with a credit card or check tion, sign and attach the <i>nts</i> (Official Form 103A). ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the <i>Application to Have the</i>	
9.	Have you filed for bankruptcy within the		District	Mhon			
	last 8 years?	Tes.	District	_ when	MM / DD / YYYY	Case number	
			District	_ When	MM / DD / YYYY	Case number	
			District	_ When		Case number	
					MM / DD / YYYY		
10.	Are any bankruptcy	🛛 No					
	cases pending or being filed by a spouse who is	C Yes.	Debtor			Relationship to you	
	not filing this case with you, or by a business partner, or by an affiliate?		District	_ When	MM/DD/YYYY	Case number, if known	
			Debtor			Relationship to you	
			District	_ When	MM / DD / YYYY	Case number, if known	
11.	Do you rent your residence?	☐ No. ☐ Yes.	 Go to line 12. Has your landlord obtained an evic No. Go to line 12. Yes. Fill out <i>Initial Statement Alpart</i> of this bankruptcy petition. 			? <i>Against You</i> (Form 101A) and file it as	

Del	otor	1
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Middle Name

Last Name

Case number (if known)_

Part 3: Report About Any Businesses You Own as a Sole Proprietor								
12. Are you a sole pro of any full- or part		No. Go to Part 4.						
business?		Yes. Name and location of 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		Name of business, if any						
sole proprietorship, us separate sheet and a to this petition.	se a	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 Esta	Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
		Stockbroker (as define	d in 11 U.S.C. § 101(53A))					
		Commodity Broker (as	Commodity Broker (as defined in 11 U.S.C. § 101(6))					
		□ None of the above						
Chapter 11 of the Bankruptcy Code	Bankruptcy Code, and are you a <i>small business</i> most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return of if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).				s debtor, you must attach your and federal income tax return or			
For a definition of sm	For a definition of <i>small</i> No. I am not filing under Chapter 11.							
business debtor, see 11 U.S.C. § 101(51D).				or according to the definition in				
Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.								
	Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.							

btor 1				Case number (if known)					
	First Name	Middle Name		Last Name					
	-								
art 4:	Report if Y	'ou Own d	or Have	Any Hazardous Prop	erty or Any	Property That	at Needs Im	mediate /	Attention
	ou own or ha		🛛 No						
	erty that pos			What is the hazard?					
	ed to pose a minent and	threat	— 163.						
	tifiable hazar	d to							
	ublic health or safety? If do you own any roperty that needs nmediate attention?			• • • • • • • • • • • • • • • • • • •					
		If immediate attention							
				s needed, wh	/ is it needed? _				
	xample, do you								
	able goods, or								
	nust be fed, or a								
	eeds urgent rep	bairs?		Where is the property?					
				,	Number	Street			
					City			State	ZIP Code
					City			Siale	ZIP Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

First Name

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.

Middle Name

Last Name

Case number (if known)_

Part 6: Answer These Qu	estions for Reporting Purpo	ses					
16. What kind of debts do you have?	16a. Are your debts prima as "incurred by an individu	rily consumer debts? Consumer debuild a primarily for a personal, family, or hou	ots are defined in 11 U.S.C. § 101(8) sehold purpose."				
you nave :	No. Go to line 16b.Yes. Go to line 17.						
		rily business debts? Business debts nvestment or through the operation of the					
	No. Go to line 16c.Yes. Go to line 17.						
	16c. State the type of debts yo	u owe that are not consumer debts or bus	siness debts.				
17. Are you filing under Chapter 7?	No. I am not filing under C	No. I am not filing under Chapter 7. Go to line 18.					
Do you estimate that aft any exempt property is excluded and administrative expenses are paid that funds will available for distribution to unsecured creditors?	administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
18. How many creditors do	1 -49	1,000-5,000	25,001-50,000				
you estimate that you owe?	5 0-99	5 ,001-10,000	5 50,001-100,000				
	100-199 200-999	10,001-25,000	More than 100,000				
19. How much do you	\$0-\$50,000	\$ 1,000,001-\$10 million	\$ 500,000,001-\$1 billion				
estimate your assets to be worth?	\$ 50,001-\$100,000	\$10,000,001-\$50 million	u \$1,000,000,001-\$10 billion				
be worth?	 \$100,001-\$500,000 \$500,001-\$1 million 	 \$50,000,001-\$100 million \$100,000,001-\$500 million 	 \$10,000,000,001-\$50 billion More than \$50 billion 				
20. How much do you	\$0-\$50,000	\$ 1,000,001-\$10 million	\$ 500,000,001-\$1 billion				
estimate your liabilities to be?	\$50,001-\$100,000	\$10,000,001-\$50 million	\$ 1,000,000,001-\$10 billion				
	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	\$10,000,000,001-\$50 billion More than \$50 billion				
Part 7: Sign Below							
For you	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and				
	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 v	vith the chapter of title 11, United States (Code, specified in this petition.				
	with a bankruptcy case can res	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.					
	*	*					
	Signature of Debtor 1	Signatur	e of Debtor 2				
	Executed on	Execute	d on				

Debtor 1		Case number (if known)					
First Name Middle Nam	e Last Name						
	· · · · · · · · · · · · · · · · · · ·						
For your attorney, if you are	I, the attorney for the debtor(s) named in this p						
represented by one	to proceed under Chapter 7, 11, 12, or 13 of tit						
represented by one	available under each chapter for which the pers						
	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				
If you are not represented	knowledge after an inquiry that the information						
by an attorney, you do not							
need to file this page.	10						
nood to mo the page	×	Date					
	Signature of Attorney for Debtor		MM / DD /YYYY				
	Signature of Attorney for Debtor						
	Printed name						
	Finited hame						
	Firm name						
	Fillinanie						
	Number Street						
	Number Street						
	City	State	ZIP Code				
	Contact phone	Email address					
	Bar number	State	-				
		Slale					

Debtor 1

First Name

Last Name

Case number (if known)_

For you if you are filing this The law allows you, as an individual, to represent yourself in bankruptcy court, but you bankruptcy without an should understand that many people find it extremely difficult to represent attorney themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney. If you are represented by To be successful, you must correctly file and handle your bankruptcy case. The rules are very an attorney, you do not technical, and a mistake or inaction may affect your rights. For example, your case may be need to file this page. 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? □ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? 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 х Signature of Debtor 1 Signature of Debtor 2 Date Date MM / DD / YYYY MM / DD / YYYY Contact phone Contact phone Cell phone Cell phone

Email address

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 E	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.

ndlord's name						
dlord's address	Number	r Street				
	City		State	ZIP Code		
vant to stay in yo	our rente	d residence after	you file your case for	r bankruptcy, als	so complete the certification below.	
Certification	About	Applicable Law	and Deposit of Re	nt		
I certify under pe	enalty of	perjury that:				
			law that applies to the by paying my landlord t		ssession (<i>eviction judgment</i>), Jent amount.	
the Voluntar			a deposit for the rent th <i>ling for Bankruptcy</i> (Offi	icial Form 101).	during the 30 days after I file	
Signatur	re of Debto	 or 1		Signature of Debtor 2		
Date				ſ	Date	
M	M/ DD	/YYYY			MM / DD / YYYY	
•		andlord with a copy of t nuation of the eviction a	this statement, the against you for 30	es above, signed the form to certify that both apply, e automatic stay under 11 U.S.C. § 362(a)(3) will) days after you file your <i>Voluntary Petition for</i>		
	(b)	receive the protect amount to your lar out Statement Abo	tion of the automatic st ndlord as stated in the o out Payment of an Evic	tay under 11 U.S. eviction judgment ction Judgment Ag	residence after that 30-day period and continue to .C. § 362(a)(3), you must pay the entire delinquent t before the 30-day period ends. You must also fill <i>gainst You</i> (Official Form 101B), file it with the ore the 30-day period ends.	

Check the Bankruptcy Rules (http://www.uscourts.gov/rules-policies/current-rules-practice-procedure) and the local court's website (to find your court's website, go to http://www.uscourts.gov/court-locator) for any specific requirements that you might have to meet to serve this statement. 11 U.S.C. §§ 362(b)(22) and 362(I)

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

- 1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- 2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- 3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- 4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

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

Executed at _____, California

Signature of Debtor 1

Date:

Signature of Debtor 2

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

Fill in this information to identify your case:					
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)		Middle Name	Last Name		
United States Bankruptcy Court for the: District of					
Case number					

Check if this is an amended filing

Official Form 106Sum

Summarize Your Assets

Part 1:

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.

Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$ 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 1c. Copy line 63, Total of all property on Schedule A/B \$__ Part 2: **Summarize Your Liabilities** Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$ 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... Your total liabilities Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I..... 5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of *Schedule J*..... \$

Part New Lastines Part 42 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. 7. What kind of debt do you have? Yes 7. What kind of debt do you have? Yes 9 Yes Yes 7. What kind of debt do you have? Yes 9 Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal. 1 family, or household purpose. 11 U.S.C. 5 (101(8). Fill out lines 8-8g for statistical purposes. 28 U.S.C. § 158. 9 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 122A-1 Line 14. S	Debtor 1	Case number (<i>it known</i>)								
			· · · · · · · · · · · · · · · · · · ·							
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 ?. 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 122D-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 Schedule E/F, 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.) 9d. Student loans. (Copy line 6f.) 9d. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	Part 4:	Answer These Questions for Administrative and Statistical Records								
7. What kind of debt do you have? 7. What kind of debt do you have? Image: the state primarity 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. Image: the state net primarity 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 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F. 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.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9c. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 9c. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 9c. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 9c. Obligations arising out of a separation agreement or divorce that you did not report as	6. Are yo	5. Are you filing for bankruptcy under Chapters 7, 11, or 13?								
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: 9. Total claim From Part 4 on Schedule E/F, copy the following: \$										
family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Our 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 Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$	7. What	kind of debt do you have?								
this form to the court with your other schedules.										
Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$		t of the form. Check this box and submit								
Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$										
From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$	9. Copy	the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :								
9a. Domestic support obligations (Copy line 6a.) \$			Total claim							
9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$	Fror	n Part 4 on <i>Schedule E/F</i> , copy the following:								
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$	9a. Do	omestic support obligations (Copy line 6a.)	\$							
9d. Student loans. (Copy line 6f.) \$	9b. Ta	xes and certain other debts you owe the government. (Copy line 6b.)	\$							
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$	9c. Cli	aims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$							
priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$	9d. St	udent loans. (Copy line 6f.)	\$							
			\$							
9g. Total. Add lines 9a through 9f. \$	9f. De	bts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$							
	9g. To	tal. 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					
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 Hav	e an Interest In	
. Do yo	u own or have any legal or equitable intere	st in any residence, building, land, or similar prop	erty?	
	b. Go to Part 2.			
□ Ye 1.1.	es. Where is the property?	 What is the property? Check all that apply. Single-family home Duplex or multi-unit building 	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
	Street address, if available, or other description	Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property? \$	Current value of the portion you own? \$
	City State ZIP Code	 Investment property Timeshare Other Who has an interest in the property? Check one. 	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County	 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another 	Check if this is cc (see instructions)	ommunity property
lf you	own or have more than one, list here:	Other information you wish to add about this it property identification number:		aims or exemptions. Put
1.2.	Street address, if available, or other description	Single-family homeDuplex or multi-unit building	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
		 Condominium or cooperative Manufactured or mobile home Land 	Current value of the entire property?	Current value of the portion you own?
	City State ZIP Code	 Land Investment property Timeshare Other 	S Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County	 Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only 		
	County	 Debtor 1 and Debtor 2 only At least one of the debtors and another 	Check if this is co (see instructions)	ommunity property
		Other information you wish to add about this ite property identification number:	m, such as local	

Debtor	1
--------	---

1.3.	Street address, if available, or other description	 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 cla the amount of any secured <i>Creditors Who Have Clain</i> Current value of the entire property? \$ Describe the nature of interest (such as fees the entireties, or a life	d claims on <i>Schedule D:</i> as Secured by Property. Current value of the portion you own? \$
	County	 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 iter property identification number:		mmunity property
		l of your entries from Part 1, including any entries nere.		\$
you own	that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles o	st in any vehicles, whether they are registered or r e, also report it on <i>Schedule G: Executory Contracts a</i> , motorcycles		5
3.1.	Make: Model:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
	Year: Approximate mileage: Other information:	 Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another 	Current value of the entire property?	Current value of the portion you own?
lf you	own or have more than one, describe here:	Check if this is community property (see instructions)	\$	\$
3.2.	Make: Model:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
	Year:Approximate mileage:	 Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another 	Current value of the entire property?	Current value of the portion you own?
	Other information:	Check if this is community property (see instructions)	\$	\$

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	Do not deduct secured cla the amount of any secure <i>Creditors Who Have Clair</i> Current value of the	d claims on <i>Schedule D:</i>
Year:	 Debtor 2 only Debtor 1 and Debtor 2 only 	Creditors Who Have Clair	
Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the	
	•		Current value of the
Other information:		entire property?	portion you own?
	Check if this is community property (see instructions)	\$	\$
Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
/ear:	-	Current value of the	Current value of the
Approximate mileage:	•	entire property?	portion you own?
	Check if this is community property (see instructions)	\$	\$
S Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
Model:	Debtor 1 only		
Year:	-		
Other information:	 Debtor 1 and Debtor 2 only At least one of the debtors and another 	Current value of the entire property?	Current value of the portion you own?
	Check if this is community property (see instructions)	\$	\$
own or have more than one, list here			
Make:		Do not deduct secured cla	
Model:	•	Creditors Who Have Clair	
	 Debtor 2 only Debtor 1 and Debtor 2 only 	Current value of the	Current value of the
Year:		entire property?	portion you own?
Year: Other information:	At least one of the debtors and another		
	'ear:	indel: gear: ppproximate mileage: chter information: chter information: Check if this is community property (see instructions) raft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and access instructions) raft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and access les: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accesso raft. Make:	Index. Image: Image

Middle Name

Pa	art 3: Describe Your Personal and Household Items	
Do	o 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	
7.	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ 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	
	Yes. Describe	\$
11	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe	\$
10	2. Jewelry	
12	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	No	\$
13	B. Non-farm animals <i>Examples:</i> Dogs, cats, birds, horses	
	Ves. Describe	\$
		Φ
14	Any other personal and household items you did not already list, including any health aids you did not list	
	No Yes. Give specific	7
	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	

Middle Name Last Name

o 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 claim or exemptions.
6. Cash <i>Examples:</i> Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file	your petition	
🖵 No				
Q Yes		Ca	ash:	\$
and other si		ints; certificates of deposit; shares in credit unions, b iultiple accounts with the same institution, list each.	prokerage houses,	
 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:		<u>_</u>	\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
	or publicly traded stocks investment accounts with brok Institution or issuer name:	erage firms, money market accounts		
				\$
				\$
 9. Non-publicly traded s an LLC, partnership, a No Yes. Give specific information about 	and joint venture Name of entity:	rated and unincorporated businesses, including % 	of ownership:	\$
them			%	\$
			%	\$

tirement or pension accounts amples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), th No Yes. List each account separately. Type of account: Institution name 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: Curity deposits and prepayments ur share of all unused deposits you have made so that you amples: Agreements with landlords, prepaid rent, public utimpanies, or others	
information about them	
tirement or pension accounts amples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), th No Yes. List each account separately. Type of account: Institution name 401(k) or similar plan: Pension plan: IRA: Retirement account: Retirement account: Additional account: Additional account: Curity deposits and prepayments ur share of all unused deposits you have made so that you amples: Agreements with landlords, prepaid rent, public utimpanies, or others	
etirement or pension accounts ramples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), th No Yes. List each account separately. Type of account: Institution name 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: Additional account: Additional account: mark Additional account: Mark Mark Additional account: Mark Mark No No Yes Additional account: Mark Mark Mark Mark	s arrift savings accounts, or other pension or profit-sharing plans e:
amples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), the No Yes. List each account separately. Type of account: Institution name 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account:	e:\$\$\$\$
amples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), the No Yes. List each account separately. Type of account: Institution name 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account:	e:\$\$\$\$
No Yes. List each account separately. Type of account: Institution name 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: Additional account: State of all unused deposits you have made so that you amples: Agreements with landlords, prepaid rent, public ution mpanies, or others	e:\$\$\$\$
account separately. Type of account: Institution name 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: Additional account: State of all unused deposits you have made so that you amples: Agreements with landlords, prepaid rent, public ution mpanies, or others	\$
401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: Additional account: Surity deposits and prepayments ur share of all unused deposits you have made so that you amples: Agreements with landlords, prepaid rent, public ution mpanies, or others	\$
Pension plan:	\$
IRA:	\$
Retirement account:	\$
Keogh:	\$ \$
Additional account: Additional account: Curity deposits and prepayments ur share of all unused deposits you have made so that you amples: Agreements with landlords, prepaid rent, public uti mpanies, or others	\$\$\$\$
Additional account:	u may continue service or use from a company
curity deposits and prepayments ur share of all unused deposits you have made so that you amples: Agreements with landlords, prepaid rent, public uti mpanies, or others	u may continue service or use from a company
curity deposits and prepayments ur share of all unused deposits you have made so that you amples: Agreements with landlords, prepaid rent, public uti mpanies, or others	u may continue service or use from a company
No	
Yes Institution name or	individual:
Electric: Gas:	\$
Heating oil:	\$
• — — — — — — — — — — — — — — — — — — —	\$
Prepaid rent:	ψ
Telephone:	\$ \$
Water:	\$ \$
Rented furniture:	\$\$
Other:	\$
	ψ
nuities (A contract for a periodic payment of money to you	u, either for life or for a number of years)
No	
146	

24. Interests in an education IR 26 U.S.C. §§ 530(b)(1), 529A	A, in an account in a qualified ABLE program, or under a qualified st (b), and 529(b)(1).	ate tuition program.	
□ Yes	Institution name and description. Separately file the records of any inter	ests.11 U.S.C. § 521(c)	:
			\$
			\$
			\$\$
			Ψ
5. Trusts, equitable or future i exercisable for your benefi	nterests in property (other than anything listed in line 1), and rights o	or powers	
D No			
Yes. Give specific]
information about them			\$
	narks, trade secrets, and other intellectual property ames, websites, proceeds from royalties and licensing agreements		
			1
Yes. Give specific information about them			\$
7. Licenses, franchises, and c <i>Examples</i> : Building permits, e	ther general intangibles exclusive licenses, cooperative association holdings, liquor licenses, profe	ssional licenses	
🗖 No			
Yes. Give specific			1
information about them			\$
loney or property owed to yo	u?		Current value of the portion you own? Do not deduct secured claims or exemptions.
8. Tax refunds owed to you			
Yes. Give specific information	ation		b
about them, includin	g whether		β
you already filed the and the tax years		State:	\$
		Local:	\$
No No	sum alimony, spousal support, child support, maintenance, divorce settlen	nent, property settlemer	nt
Yes. Give specific information	ation	Alimony:	\$
		Maintenance:	\$ \$
		Support:	\$ \$
		Divorce settlement:	\$ \$
		Property settlement:	¥ \$
		r roperty settlement.	Ψ
Social Security be	wes you sability insurance payments, disability benefits, sick pay, vacation pay, wo nefits; unpaid loans you made to someone else	rkers' compensation,	
No No			1
Yes. Give specific information	ation		\$
			¥

31. Interests in insurance policies <i>Examples:</i> Health, disability, or lif	e insurance; health savings account (HSA);	credit, homeowner's, or renter's insurance	
D No			
Yes. Name the insurance con of each policy and list its		Beneficiary:	Surrender or refund value:
			\$
			\$
			¢
			Ψ
If you are the beneficiary of a livir property because someone has d		ce policy, or are currently entitled to receive	
No			_
Yes. Give specific information	.		\$
			Φ
Examples: Accidents, employmer	nether or not you have filed a lawsuit or in nt disputes, insurance claims, or rights to su		
No			
Yes. Describe each claim			\$
34 Other contingent and unliquida	ted claims of every nature, including cou	interclaims of the debtor and rights	
to set off claims			
No No			_
Yes. Describe each claim			\$
			⊅
35. Any financial assets you did no	t already list		
No			
Yes. Give specific information	n		\$
36. Add the dollar value of all of yo	our entries from Part 4, including any ent	ries for pages you have attached	
for Part 4. Write that number he	ere	→	\$
Part 5: Describe Any Bus	siness-Related Property You Ow	n or Have an Interest In. List any r	eal estate in Part 1.
, , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·	
37. Do you own or have any legal o	or equitable interest in any business-relat	ed 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 commis	ssions vou already earned		
Yes. Describe			1
			\$
39. Office equipment, furnishings,	and supplies		-
		nes, rugs, telephones, desks, chairs, electronic devices	
🔲 No			
Yes. Describe			\$
			Y

Debtor	1
--------	---

Middle Name

40. Machinery, fixtures, e	equipment, supplies you use in business, and tools of your trade		
D No			_
Yes. Describe			\$
l			
41. Inventory			
□ No			1
Yes. Describe			\$
L			
42. Interests in partnersh	ips or joint ventures		
D No			
Yes. Describe	Name of entity:	% of ownership:	
		%	\$
		%	\$
		%	\$
	ng lists, or other compilations		
	include personally identifiable information (as defined in 11 U.S.C. § 101(41A	\\ 2	
)):	
Yes. Desc	rihe		1
			\$
	property you did not already list		
NoYes. Give specific			
information			\$
			\$
			\$
			\$
			\$\$
			\$
	of all of your entries from Part 5, including any entries for pages you have at		\$
for Part 5. Write that	number here	→	Ψ
	ny Farm- and Commercial Fishing-Related Property You Own or Ha	ve an Interest In	
it you own o	r have an interest in farmland, list it in Part 1.		
46 Do you own or have a	any legal or equitable interest in any farm- or commercial fishing-related prop	perty?	
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			
	poultry, farm-raised fish		
No No			
Yes]
			\$

Debtor 1			Case number (if known)	
	First Name Last Name Last Name			
48. Crops—either growing or harvested				
D No				7
	Give specific nation			\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade				
				7
				\$
50. Farm and fishing supplies, chemicals, and feed				
No No				
La res.				\$
51. Any farm- and commercial fishing-related property you did not already list				
Yes.	Give specific nation			\$
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				
D No				¢
	Give specific nation			\$ \$
				\$\$
				·
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: T	otal real estate, line 2		→	\$
56. Part 2: T	otal vehicles, line 5	\$		
57. Part 3: T	otal personal and household items, line 15	\$		
58. Part 4: T	otal financial assets, line 36	\$		
59. Part 5: T	otal business-related property, line 45	\$		
60. Part 6: T	otal farm- and fishing-related property, line 52	\$		
61. Part 7: T	otal other property not listed, line 54	+\$		
62. Total pe	rsonal property. Add lines 56 through 61.	\$	Copy personal property total →	+\$
63. Total of	all property on Schedule A/B. Add line 55 + line 62			\$

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 o	f
Case number (If known)			
Official F	orm 106C	,	

Fill in this information to identify your case:

Check if this is an amended filing

Official Form 106C Schedule C: The Property You Claim as Exempt

04/25

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 P	roperty You	Claim as	Exempt
i ai t i i	naonin' ino i	iopolity iou	orann ao	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 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:	\$	 \$ 100% of fair market value, up to any applicable statutory limit 	
	Brief description: Line from Schedule A/B:	\$	 \$ 100% of fair market value, up to any applicable statutory limit 	
	Brief description: Line from Schedule A/B:	\$	 \$ 100% of fair market value, up to any applicable statutory limit 	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/28 and every 3 No Yes. Did you acquire the property covered No Yes	years after that for cases		

Middle Name Last Name

Case number (if known)_

Brief description of the property and on <i>Schedule A/B</i> that lists this property		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:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief	\$	□ \$	
description:	Ŧ	 100% of fair market value, up to 	

Schedule A/B:

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)		Middle Name	Last Name	
	Bankruptcy Court for the:			
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

for each claim. If more than one creditor h As much as possible, list the claims in alp	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
	Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Gar Joan Statutory lien (such as tax lien, mechanic's lien)			
 Debtor 1 and Debtor 2 only At least one of the debtors and another 	 Judgment lien from a lawsuit 			
At least one of the debtors and another	 Other (including a right to offset) 			
Check if this claim relates to a community debt		_		
Date debt was incurred	Last 4 digits of account number			
-	Last 4 digits of account number Describe the property that secures the claim:	\$	\$\$	\$
Date debt was incurred		\$	\$	\$
Date debt was incurred 2.2 Creditor's Name		\$	\$	\$
Date debt was incurred	Describe the property that secures the claim:	\$	\$	\$
Date debt was incurred 2.2 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply.	\$	\$:	\$
Date debt was incurred 2.2 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent	\$	\$	\$
Date debt was incurred	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$	\$	\$
Date debt was incurred	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$	\$	\$
Date debt was incurred	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$	\$	\$
Date debt was incurred 2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured	\$	\$;	\$
Date debt was incurred 2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)	\$	\$:	\$
Date debt was incurred 2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)	\$	\$	\$
Date debt was incurred 2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$;	\$
Date debt was incurred 2.2 Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		\$;	\$
Date debt was incurred 2.2 Creditor's Name Number Street City State ZIP Code Who owes 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 relates to a	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$;	\$

Middle Name Last Name

Case number (if known)_

Part 1:	Additional Page After listing any entries on this p by 2.4, and so forth.	age, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor	's Name	Describe the property that secures the claim:	\$	\$	\$
City Who ow Debt Debt At le Che com	State ZIP Code res the debt? Check one. for 1 only for 2 only for 1 and Debtor 2 only ast one of the debtors and another ck if this claim relates to a simunity debt bt was incurred	 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
		-	<u>۴</u>	¢	¢
City Who ow Debt Debt At le Che com	State ZIP Code res the debt? Check one. for 1 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number	\$		\$
Creditor Number	's Name Street	As of the date you file, the claim is: Check all that apply. Contingent	\$	۵	۵
City	State ZIP Code	Unliquidated Disputed			
 Debt Debt Debt At le Che 	res the debt? Check one. for 1 only for 2 only for 1 and Debtor 2 only ast one of the debtors and another ck if this claim relates to a munity debt	 Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
	bt was incurred	Last 4 digits of account number			
lf	this is the last page of your form,	in Column A on this page. Write that number here: add the dollar value totals from all pages.	\$		
	Irite that number here:		\$		

page ____ of ____

First Name Middle Name Last Name

Case number (if known)____

Pa	Part 2: List Others to Be Notified for a Debt That You Already Listed					
ag yo	ency is tryi u have mor	ng to collect from you for a	a debt you owe to of the debts that	someone else, list th you listed in Part 1, li	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, if ist the additional creditors here. If you do not have additional persons to	
					On which line in Part 1 did you enter the creditor?	
	Name				Last 4 digits of account number	
	Number	Street			-	
	Tumbor					
					-	
	City		State	ZIP Code	-	
					On which line in Part 1 did you enter the creditor?	
	Name				Last 4 digits of account number	
	Number	Street			-	
					_	
					_	
	City		State	ZIP Code		
					On which line in Part 1 did you enter the creditor?	
	Name				Last 4 digits of account number	
	Number	Street			-	
					-	
	City		State	ZIP Code	-	
					On which line in Part 1 did you enter the creditor?	
	Name				Last 4 digits of account number	
					_	
	Number	Street				
					-	
	City		State	ZIP Code	-	
					On which line in Part 1 did you enter the creditor?	
	Name				Last 4 digits of account number	
	Number	Street			-	
					-	
	City		State	ZIP Code		
					On which line in Part 1 did you enter the creditor?	
	Name				Last 4 digits of account number	
	Number	Street			-	
					_	
	<u></u>		0		_	
	City		State	ZIP Code		

	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
Case number	Bankruptcy Court for the:		_
(If known)			

Fill in this information to identify your case:

Check if this is an amended filing

Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims

. . . .

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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).

2.1 Image: constraint of the second second number indicated by the second second number indicated by the second second number indicated indi	Part 1: List All of Your PRIORITY Unsecu	ed Claims			
each claim isted, identify what type of claim it is. If a claim has both priority and onopriority amounts. Sum the as possible, list the claim is alphabetical order according to the creditor's name. If you have more than two priority amounts. As the debt incurred? 2.1 Issted is digits of account number \$\$\$ \$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$ 2.1 Issted to debt? Check one. Disputed 10 Dottor 2 only Dottor 2 only Dottor 2 only 10 Dottor 2 only Dottor 1 and Debtor 2 only Dottor 1 and Debtor 2 only S\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$	No. Go to Part 2.	ns against you?			
2.1 Total claim Priority amount 2.1 Priority Creditor's Name Last 4 digits of account number \$\$\$\$	each claim listed, identify what type of claim it is. I nonpriority amounts. As much as possible, list the	f a claim has both priority and nonpriority amounts, list th claims in alphabetical order according to the creditor's n	at claim here a ame. If you hav	nd show both ve more than t	priority and wo priority
1.1	(For an explanation of each type of claim, see the	instructions for this form in the instruction booklet.)			
Priority Creditor's Name Last 4 digits of account number\$\$\$\$\$\$\$			Total claim		Nonpriority amount
Number Street As of the date you file, the claim is: Check all that apply. City State ZIP Code Contingent Who incurred the debt? Check one. Debtor 1 only Disputed Debtor 1 only Debtor 2 only Demestic support obligations At least one of the debtors and another Claims for death or personal injury while you were intoxicated No Check if this claim is for a community debt Last 4 digits of account number Image: Priority Creditor's Name Last 4 digits of account number \$		Last 4 digits of account number	\$	_ \$	\$
City State ZIP Code Contingent Who incurred the debt? Check one. Debtor 1 only Disputed Debtor 1 only Debtor 2 only Domestic support obligations At least one of the debtors and another Check if this claim is for a community debt Domestic support obligations Is the claim subject to offset? Domestic support obligations Taxes and certain other debts you owe the government No Check if this claim is for a community debt Last 4 digits of account number \$	Number Street	When was the debt incurred?			
City State 2/P Code Unliquidated Unliquidated Debtor 1 only Disputed Debtor 2 only Type of PRIORITY unsecured claim: Debtor 3 only Domestic support obligations At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations No Other. Specify Yes State Invide Last 4 digits of account number Yes State Invide State Vio incurred the debt? Check one. When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. City State Debtor 1 only Disputed Debtor 2 only Disputed Debtor 1 only Disputed Debtor 2 only Disputed Type of PRIORITY unsecured claim: Disputed Debtor 1 only Debtor 2 only Debtor 2 only Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were i		As of the date you file, the claim is: Check all that apply	/ .		
Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Other. Specify No Other. Specify Priority Creditor's Name Last 4 digits of account number Whon incurred the debtor? Check one. S Priority Creditor's Name As of the date you file, the claim is: Check all that apply. City State Vincingent Unliquidated Unliquidated Disputed Who incurred the debtor's and another Contingent Unliquidated Disputed Priority Creditor's Name The of PRIORITY unsecured claim: Debtor 1 only State Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Domestic support obligations Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated	City State ZIP Code	Contingent			
□ Debtor 1 only □ Disputed □ Debtor 2 only Type of PRIORITY unsecured claim: □ Debtor 1 and Debtor 2 only □ Domestic support obligations □ At least one of the debtors and another □ Taxes and certain other debts you owe the government □ Check if this claim is for a community debt □ Claims for death or personal injury while you were intoxicated □ No □ Other. Specify		Unliquidated			
□ 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? □ Other. Specify □ Yes □ .2 Priority Creditor's Name Last 4 digits of account number\$\$\$.2 Priority Creditor's Name Last 4 digits of account number	Debtor 1 only	Disputed			
 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 Claims for death or personal injury while you were intoxicated Other. Specify		Type of PRIORITY unsecured claim:			
Check if this claim is for a community debt Is the claim subject to offset? No Yes 2 Priority Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. City Other . Specify Number As of the date you file, the claim is: Check all that apply. City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 onl Debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 onl Debtor 2		Domestic support obligations			
Is the claim subject to offset? Image: Claim subject to offset? No Other. Specify Yes Image: Claim subject to offset? Priority Creditor's Name Last 4 digits of account number Number Street Number Street As of the date you file, the claim is: Check all that apply. City State Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 1 only 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		Taxes and certain other debts you owe the government			
No Other. Specify Yes 1.2 Priority Creditor's Name Last 4 digits of account number Number Number Number Number Number Number Street As of the date you file, the claim is: Check all that apply. City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Detter the debtrs and another Check if this claim is for a community debt	-				
.2 Last 4 digits of account number\$\$\$	•	Other. Specify	_		
Priority Creditor's Name Class 4 digits of account number\$\$\$	Yes				
Number Street Number Street As of the date you file, the claim is: Check all that apply. City State City State City State Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Detor 1 and Debtor 2 only Detor 1 and Debtor 2 only Detor 1 and Debtor 2 only Claims for a community debt Is the claim subject to offset? Number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated <td></td> <td>Last 4 digits of account number</td> <td>\$</td> <td>\$</td> <td>\$</td>		Last 4 digits of account number	\$	\$	\$
As of the date you file, the claim is: Check all that apply. City State City State Debtor 1 only Disputed Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Claims for a community debt Is the claim subject to offset? Other. Specify	Priority Creditor's Name	When was the debt incurred?			
City State ZIP Code Who incurred the debt? Check one. Disputed Debtor 1 only Disputed Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Claims for a community debt Is the claim subject to offset? Other. Specify	Number Street	As of the date you file, the claim is: Check all that apply	/ .		
Who incurred the debt? Check one. Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify					
Implemented the destribution Debtor 1 only Debtor 2 only Debtor 1 and 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 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 Is the claim subject to offset? Other. Specify	City State ZIP Code				
 Debtor 1 only Debtor 2 only Debtor 1 and 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 	Who incurred the debt? Check one.	Disputed			
Image: Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and Debtor 2 only Image: Debtor 1 and 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 					
 At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No 					
Is the claim subject to offset? No 					
No No	lacksquare Check if this claim is for a community debt	intoxicated			
		Other. Specify	-		

art 1: Your PRIORITY Unsecured	I Claims - Continuation Page			
fter listing any entries on this page, num	ber them beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	_ \$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP 0	Code Contingent			
	Disputed			
Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	 Claims for death or personal injury while you were 			
Check if this claim is for a communit	interviente d			
Is the claim subject to offset?				
☐ No ☐ Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP C				
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	 Taxes and certain other debts you owe the government 			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a communit	ty debt intoxicated Other. Specify			
Is the claim subject to offset?				
No Yes				
	Last 4 digits of account number	\$	_ \$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
City State ZIP C	Code Unliquidated			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were intoxicated			
Check if this claim is for a communit	Other. Specify			
Is the claim subject to offset?				

Case number (if known)_

Debtor 1

	First Name Middle Name Last Name		
Pa	rt 2: List All of Your NONPRIORITY Unsecured Claims	S	
3	Do any creditors have nonpriority unsecured claims against yo	au?	
	\square No. You have nothing to report in this part. Submit this form to the		
	Yes		
4	List all of your nonpriority unsecured claims in the alphabetical	I order of the creditor who holds each claim. If a creditor ha	more than one
	nonpriority unsecured claim, list the creditor separately for each clai	m. 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 no	npriority unsecured
	claims fill out the Continuation Page of Part 2.		
-			Total claim
4.1		_ Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Turne of NONDRIODITY unconverted alarma	
	 Debtor 1 and Debtor 2 only At least one of the debtors and another 	Type of NONPRIORITY unsecured claim:	
	_	U Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debt	3
		Other. Specify	
	Yes		
4.2		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
		_	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.		
	Debtor 1 only	Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts 	3
		Other. Specify	
4.3		Last 4 digits of account number	
	Nonpriority Creditor's Name		\$
		When was the debt incurred?	
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Who incurred the debt? Check one.		
	Debtor 1 only Debtor 2 only	Disputed	
	 Debtor 2 only Debtor 1 and Debtor 2 only 		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts 	6
	No Yes	Other. Specify	

Case number (if known)____

Debtor 1

Case number (if known)_

t 2: Your NONPRIORITY Unsecured Claims – Contin	nuation Page	
r listing any entries on this page, number them beginning wit	th 4.4, followed by 4.5, and so forth.	Total clai
	Last 4 digits of account number	¢
Nonpriority Creditor's Name	When was the debt incurred?	Φ
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	 Unliquidated Disputed 	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
 Debtor 1 and Debtor 2 only At least one of the debtors and another 	Student loans	
_	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No □ Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	 Other. Specify 	
□ No □ Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Whe incurred the debt? Obselvers		
Who incurred the debt? Check one.	Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify 	
No No		
Yes		

Part 3:

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

ame Street ity State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor? Line of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Clair Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the criginal creditor?
ity State ZIP Code	Part 2: Creditors with Nonpriority Unsecured Clair Last 4 digits of account number
ity State ZIP Code	Last 4 digits of account number
	On which entry in Dart 4 on Dart 9 did you list the entrined and iter?
ame	On which entry in Dart 4 on Dart 2 did your list the entries of an diter?
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (<i>Check one</i>): D Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
	Last 4 digits of account number
ity State ZIP Code	-
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
ity State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
ame	
	Line of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured Claims
ity State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
ame	
umber Street	Line of (<i>Check one</i>):
	Claims
	Last 4 digits of account number
ity State ZIP Code	
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
ano	Line of (<i>Check one</i>): D Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
ity State ZIP Code	Last 4 digits of account number
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
ity State ZIP Code	Last 4 digits of account number

Part 4: A	4: Add the Amounts for Each Type of Unsecured Claim							
6. Total the a Add the a	amounts of certain types of unsecured claims. This informa mounts for each type of unsecured claim.	tion is	for statistical reporting purposes on	ly. 28 U.S.C. § 159.				
			Total claim					
Total claims	6a. Domestic support obligations	6a.	\$					
from Part 1	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.	\$					
			Total claim					
Total claims	6f. Student loans	6f.	\$					
from Part 2	² 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$					
	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.	\$					

Fill in this information to identify your case:					
Debtor	First Name	Middle Name	Last Name		
Debtor 2 (Spouse If filing)		Middle Name	Last Name		
United States					
Case number(If known)					

Check if this is an amended filing

Official Form 106G Schedule G: Executory Contracts and Unexpired Leases

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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.

Sec. 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	

Case number (if known)_

		Additional Pa	ge if You Ha	ve More Contracts or Leas	ses
	Person	or company w	th whom you l	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	

	City
Offic	al Form 106H
Onio	

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					

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									
	2. 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.)									
	D No. 0	Go to line 3.								
	Yes.	Did your spouse, former s	pouse, or legal equivalent live	e with you at the time?						
		lo								
			tate or territory did you live?		Fill in the name and current address of that person.					
	-	co. In which community of		•··						
	1	Name of your spouse, former spou	se, or legal equivalent							
	1	Number Street								
	ō	City	State	ZIP Code						
2	In Colum	on 1 list all of your code	btors. Do not includo vour s	nouso as a codobtor i	if your spouse is filing with you. List the person					
		•	•	•	. Make sure you have listed the creditor on					
		-			e G (Official Form 106G). Use Schedule D,					
		le E/F, or Schedule G to 1	•		e e (Onicial Portir 1000). Ose schedule D,					
	Concau									
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the debt					
					Check all schedules that apply:					
0.4]				check all conceales that apply.					
3.1					Schedule D, line					
	Name				Schedule E/F, line					
	Number	Street								
	Number	Oliver			Schedule G, line					
	City		State	ZIP Code						
3.2										
	Name				Schedule D, line					
					Schedule E/F, line					
	Number	Street			Schedule G, line					
	City		State	ZIP Code						
3.3					Schedule D, line					
	Name									
					Schedule E/F, line					
	Number	Street			Schedule G, line					
	City		State	ZIP Code						
			- 1410							

Last Name

	Ad	dditional Page to Lis	st More Codebtors		
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3					
	Name				 Schedule D, line Schedule E/F, line
					Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3					
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
	,				
3	Name				Schedule D, line
	Hamo				□ Schedule E/F, line
	Number	Street			Contraction Contra
	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3					— Schedule D, line
	Name				Schedule E/F, line
	Neurolean				Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3					
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	

Fill in this in	formation to ide	entify 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 fo	or the: District o	of	
Case number (If known)				Check if this is:
				A supplement showing postpetition chapter income as of the following date:
Official Fo	orm 106l			MM / DD / YYYY

Official Form 1061 Schedule I: Your Income

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.		Debtor 1			Debtor 2 or non-fi	ling spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	 Employed Not employed 	ed		EmployedNot employed	
	Include part-time, seasonal, or self-employed work.						
	Occupation may include student or homemaker, if it applies.	Occupation					
		Employer's name					
		Employer's address					
			Number Street			Number Street	
			City	Stat	e ZIP Code	City	State ZIP Code
		How long employed there	?				
P	Part 2: Give Details About	Monthly Income					
	Estimate monthly income as of spouse unless you are separated.		If you have nothir	ng to	report for any line, wri	te \$0 in the space. Inclu	ude your non-filing
	If you or your non-filing spouse ha below. If you need more space, at			rmatio	on for all employers fo	r that person on the line	S
					For Debtor 1	For Debtor 2 or non-filing spouse	
2	. List monthly gross wages, sala deductions). If not paid monthly,	ary, and commissions (befo calculate what the monthly w	re all payroll age would be.	2.	\$	\$	
3	Estimate and list monthly over	time pay.		3.	+\$	+ \$	
4	. Calculate gross income. Add lir	ne 2 + line 3.		4.	\$	\$	

12/15

_				
D	eb	to	r	1

Middle Name

Last Name

Case number (if known)_

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$	\$	
5. List all payroll deductions:				
	5.	•	^	
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.	\$	\$	
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 depende regularly receive	ent		_	
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 assistar 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.	\$	\$]
 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.	\$	_ + \$	= \$
1. State all other regular contributions to the expenses that you list in Scher Include contributions from an unmarried partner, members of your household, friends or relatives.			oommates, and other	_
Do not include any amounts already included in lines 2-10 or amounts that are	not av	ailable to pay exp	penses listed in Schedule J.	
Specify:			11.	+ \$
2. Add the amount in the last column of line 10 to the amount in line 11. The	result	is the combined	•	\$
Write that amount on the Summary of Your Assets and Liabilities and Certain S	วเสแรโไ	vai miornation, lī	it applies 12.	v Combine
				monthly i

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							
Case number							

Official Form 106J

Schedule J: Your Expenses

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

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 Hou	sehold				
1. Is this a j	oint case?					
Yes.	Go to line 2. Does Debtor 2 live in a s	eparate household?				
		e Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.			
-	ave dependents? t Debtor 1 and	NoYes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Debtor 2. Do not sta names.	ate the dependents'	each dependent		· -		No Yes No
				· _		 Yes No Yes No Yes No
expenses	expenses include s of people other than and your dependents?	☐ No ☐ Yes				Yes
Part 2:	Estimate Your Ongoi	ng Monthly Expenses				
expenses a applicable o	s of a date after the ban date.	bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme -cash government assistance if you	ental Schedule J, check the box		•	•
	•	it on Schedule I: Your Income (Offic			Your expe	nses
	al or home ownership e for the ground or lot.	xpenses for your residence. Include	first mortgage payments and	4.	\$	
If not in	cluded in line 4:					
4a. Rea	al estate taxes			4a.	\$	
4b. Pro	pperty, homeowner's, or re	enter's insurance		4b.	\$	
4c. Ho	me maintenance, repair, a	and upkeep expenses		4c.	\$	
4d. Ho	meowner's association or	condominium dues		4d.	\$	

Debtor	1
--------	---

Middle Name

Last Name

Case number (if known)

			Your expenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:	<u>_</u>	¢
	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, <i>Schedule I, Your Income</i> (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 Incom	ne.	
	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.	\$

Other. Specify:	21.	+\$
Other. Specify:	21.	+\$
		- +
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.	\$
		L
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 <i>monthly net income</i> .	23c.	\$
Do you expect an increase or decrease in your expenses within the year after you file the	nis form?	
For example, do you expect to finish paying for your car loan within the year or do you expect mortgage payment to increase or decrease because of a modification to the terms of your mo		
□ No.		
Yes. Explain here:		

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	ankruptcy Court for	the:	District of(State)
Case number (If known)			

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.

	2art 1: Describe Your Hous	sehold			
1.	 Do you and Debtor 1 maintain set No. Do not complete this for Yes 				
2.	Do you have dependents? Do not list Debtor 1 but list all other dependents of Debtor 2	 No Yes. Fill out this information for each dependent 	Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
	regardless of whether listed as a dependent of Debtor 1 on Schedule J.				NoYes
	Do not state the dependents' names.				NoYes
					NoYes
					NoYes
					NoYes
3.	Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	☐ No ☐ Yes			
Pa	art 2: Estimate Your Ongoin	ng 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.

		expenses paid for with non-cash government assistance if you know the value of sistance and have included it on <i>Schedule I: Your Income</i> (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		4.	\$
	lf no	ot 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.	\$

Debtor	1	
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Middle Name

Last Name

Case number (if known)_

			Your expenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$
		0.	
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.	\$
10	Taura Da nationaluda taura daduatad fransusuu asu asiaaludad in linaa 4 as 20		
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
		10.	· <u></u>
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, <i>Schedule I, Your Income</i> (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 Incom	e.	
	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					Case number (if known)			
		First Name	Middle Name	Last Name				
21	Other S	necify:				21.	+\$	
21.		peony				21.	- \$	
22	Your mo	nthly expen	ses. Add lines 5	through 21				
22.					ne 22b of Schedule J to calculate the			
			otor 1 and Debtor			22.	\$	
23.	Line not u	sed on this fo	orm.					
24.	Do you ex	cpect an inc	rease or decrea	se in your expenses within t	he year after you file this form?			
	-	-		ying for your car loan within th				
		-			to the terms of your mortgage?			
					, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	No.							
	Yes.	Explain he	ere:					

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 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	
D' I	
	o is NOT an attorney to help you fill out bankruptcy forms?
	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I I that they are true and correct.	nave read the summary and schedules filed with this declaration and
,	
	44
Signature of Debtor 1	Signature of Debtor 2
Date	Date
	ואואי / עע / איזאי

Fill in this information to identify your case:								
Debtor 1								
Debtor 2 (Spouse, if filing)		Middle Name	Last Name					
United States E	Bankruptcy Court for the:	District of						
Case number								

Check if this is an
amended filing

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

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							
	hat is your current marital status? Married Not married Iring the last 3 years, have you lived anywhere	other than where y	ou live now?					
	No Yes. List all of the places you lived in the last 3	years. Do not include	e where you live now.					
	Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there				
	Number Street	- From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To				
	City State ZIP Code	_	City State ZIP Code					
	Number Street	- From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To				
	City State ZIP Code	_	City State ZIP Code					
sta	 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							

Debtor	1
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Middle Name

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	detai	ls.

First Name

	Debtor 1		Debtor 2)ebtor 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:	 Wages, commissions, bonuses, tips Operating a business 	\$	Wages, commissions, bonuses, tipsOperating a business	\$	
For last calendar year: (January 1 to December 31,)	 Wages, commissions, bonuses, tips Operating a business 	\$	 Wages, commissions, bonuses, tips Operating a business 	\$	
For the calendar year before that: (January 1 to December 31,)	 Wages, commissions, bonuses, tips Operating a business 	\$	 Wages, commissions, bonuses, tips Operating a business 	\$	

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

Last Name

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,)		\$ \$ \$		\$ \$ \$
For the calendar year before that: (January 1 to December 31,)		\$ \$ \$		\$ \$ \$

Debtor 1	First Name Middle Name Last Name		Case r	number (if known)						
	First Name Middle Name Last Name									
Dort 2	List Contain Dovements Vev Made Refe	we Veu Filed	for Donkrumtov							
Part 3:	List Certain Payments You Made Befo		тог ванкгиртсу							
6. Are eith	ner Debtor 1's or Debtor 2's debts primarily o	consumer debt	ts?							
No.	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 bankru	uptcy, did you pa	ay any creditor a total of	\$8,575* or more?						
	No. Go to line 7.									
	Yes. List below each creditor to whom you total amount you paid that creditor. D	u paid a total of Do not include p	\$8,575* or more in one ayments for domestic su	or more payments and the upport obligations, such as						
	child support and alimony. Also, do r	not include payn	nents to an attorney for t	this bankruptcy case.						
	* Subject to adjustment on 4/01/28 and every	3 years after th	at for cases filed on or a	after the date of adjustment.						
🛛 Yes	. Debtor 1 or Debtor 2 or both have primarily	/ consumer de	bts.							
	During the 90 days before you filed for bankru	iptcy, did you pa	ay any creditor a total of	\$600 or more?						
	No. Go to line 7.									
	Yes. List below each creditor to whom you	u paid a total of	\$600 or more and the to	otal amount you paid that						
	creditor. Do not include payments for alimony. Also, do not include payment	r domestic supp	oort obligations, such as	child support and						
	aimony. Also, do not include payment									
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for					
			\$	\$						
	Creditor's Name		Φ	Φ	Mortgage					
					Car					
	Number Street				Credit card					
					Loan repayment					
					 Suppliers or vendors Other 					
	City State ZIP Code				■ Other					
		-								
	Creditor's Name		\$	\$	Mortgage					
					Car					
	Number Street				Credit card					
					Loan repayment					
					Suppliers or vendors					
	City State ZIP Code				• Other					
			\$	\$						
	Creditor's Name		Ψ	Ψ	Mortgage					
	Number Street				 Credit card Loan repayment 					
					 Loan repayment Suppliers or vendors 					
					Other					
	City State ZIP Code									

Debtor [·]	1
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Middle Name

Last Name

Case number (if known)_

No Pates of payment Total amount payment Amount you still reason for this payment Image: Share	7.	<i>Insic</i> corp ager		any genera n officer, di ess you op	l partners; rela rector, person	atives of any g n in control, or	eneral partners; pa owner of 20% or m	rtnerships of whicl ore of their voting	
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Insider's Name			Number Street						
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Insider's Name Number Street City State 2IP 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. Insider's Name Insider's Name Insider's Name Siteet Siteet Siteet Siteet Insider's Name Insider's Name Insider's Name Siteet Insider's Name		_	City	State 2					
Number Street							\$	\$	
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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 Amount you still Reason for this payment Include creditor's name Insider's Name City State ZIP Code S S Insider's Name Insider's			Number Street						
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Insider's Name								-	
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City State ZIP Code									
Insider's Name \$			Number Street						
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Insider's Name									
							\$	\$	
Number Street			Insider's Name						
Number Street									
			Number Street						
City State ZIP Code			City	State 2	ZIP Code				

Debtor 1

First Name Middle Name

Last Name

Case number (if known)_

4: Identify Legal Actions, R ithin 1 year before you filed for ba	•	-		or administra	tive proceed	dina?
st all such matters, including person					-	-
nd contract disputes.						
Yes. Fill in the details.						
	Nature	of the case	Court or agend	су.		Status of the case
				-		
Case title			Court Name			Dending
						On appeal
			Number Street			Concluded
Case number						
			City	State Z	IP Code	
						D Pending
Case title			Court Name			On appeal
			Number Street			Concluded
			Number Street			
Case number			City	State Z	IP Code	
No. Go to line 11. Yes. Fill in the information below.		any of your property	repossessed, forecle	osed, garnish	ned, attached	d, seized, or levied?
neck all that apply and fill in the deta No. Go to line 11.		Describe the property			ned, attached Date	
neck all that apply and fill in the deta No. Go to line 11.						Value of the property
neck all that apply and fill in the deta No. Go to line 11.						
neck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below.			ty			Value of the property
neck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below.		Describe the proper	ty			Value of the property
neck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below.		Describe the propert Explain what happed Property was f Property was f	ty ned repossessed. foreclosed.			Value of the property
No. Go to line 11. Yes. Fill in the information below.	ails below.	Describe the proper Explain what happen Property was f Property was f Property was f	ty ned repossessed. foreclosed. garnished.			Value of the property
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street		Describe the propert Explain what happed Property was f	ty ned repossessed. foreclosed. garnished. attached, seized, or le	vied.	Date	Value of the property
No. Go to line 11. Yes. Fill in the information below.	ails below.	Describe the proper Explain what happen Property was f Property was f Property was f	ty ned repossessed. foreclosed. garnished. attached, seized, or le	vied.		Value of the property
No. Go to line 11. Yes. Fill in the information below.	ails below.	Describe the propert Explain what happed Property was f	ty ned repossessed. foreclosed. garnished. attached, seized, or le	vied.	Date	Value of the property \$ Value of the property
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heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below.	ails below.	Describe the propert Explain what happed Property was f	ty ned repossessed. foreclosed. garnished. attached, seized, or le ty	vied.	Date	Value of the property \$ Value of the property
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neck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State Creditor's Name	ails below.	Describe the propert Explain what happed Property was f Explain what happed Explain what happed Explain what happed Property was f Property was f	ty ned repossessed. foreclosed. garnished. attached, seized, or le ty ned repossessed.	vied.	Date	Value of the property \$ Value of the property
neck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State Creditor's Name	e ZIP Code	Describe the proper Explain what happed Property was f Explain what happed Explain what happed	ty ned repossessed. foreclosed. ty ned repossessed. foreclosed. foreclosed. foreclosed. foreclosed. foreclosed.	vied.	Date	Value of the property \$ Value of the property

Debtor 1	Case number (if known)		
First Name Middle Name Last	Name		
11. Within 90 days before you filed for bankru	ptcy, did any creditor, including a bank or financial instituti	on, set off any am	ounts from your
accounts or refuse to make a payment be		on, oor on any an	,
	-		
Yes. Fill in the details.			
	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name	-	was taken	
Number Street	-		\$
	-		
City State ZIP Code	Last 4 digits of account number: XXXX–		
12. Within 1 year before you filed for bankrup	cy, was any of your property in the possession of an assig	nee for the benefit	of
creditors, a court-appointed receiver, a cu			
D No			
Part 5: List Certain Gifts and Contribu	itions		
13. Within 2 years before you filed for bankrug	otcy, 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	Describe the gifts	Dates you gave	Value
per person	-	the gifts	
		Τ	
			\$
Person to Whom You Gave the Gift	-		Ψ
			\$
	-		Φ
	_		
Number Street			
	_		
City State ZIP Code			
Person's relationship to you			
	-		
Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
per person		the gifts	Value
			\$
Person to Whom You Gave the Gift			T
			\$
	-		Φ
Number Street	-		
City State ZIP Code	-		
Person's relationship to you			
		_	

1	Case number (if known)		
First Name Middle Name	Last Name		
ithin 2 years before you filed for bank	ruptcy, did you give any gifts or contributions with a total valu	e of more than \$6	00 to any charit
No			
Yes. Fill in the details for each gift or c	contribution.		
Gifts or contributions to charities	Describe what you contributed	Date you	Value
that total more than \$600		contributed	
		T	
			\$
Charity's Name			Ψ
			\$
			+
Number Street			
City State ZIP Code			
6: List Certain Losses			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	Date of your loss	Value of proper lost
		T	
			\$
7: List Certain Payments or Tr	ansfers		
	uptcy, did you or anyone else acting on your behalf pay or tra	nsfer any property	to anyone
	cy or preparing a bankruptcy petition?		
	preparers, or credit counseling agencies for services required in y	our bankruptcy.	
Yes. Fill in the details.			
	Description and value of any property transferred	Date payment or transfer was	Amount of pay
Person Who Was Paid	-	made	
Number Street	-		\$
			\$
City State ZIP Code	-		
Email or website address	-		
Person Who Made the Payment, if Not You	_		

	Last Name			
	Description and value of any property	transferred	Date payment or	Amount o
			transfer was made	payment
Person Who Was Paid				
				\$
Number Street				\$
				*
City State ZIP Coc	de			
Email or website address				
Develop With Martin the Develop 1 (Mart Mart				
Person Who Made the Payment, if Not You				
	kruptcy, did you or anyone else acting or		r transfer any property t	o anyone w
	creditors or to make payments to your cre	editors?		
o not include any payment or transfer t	that you listed on line 16.			
No Yes, Fill in the details.				
res. Fill in the details.		(D-4	A
	Description and value of any property	transferred	Date payment or transfer was	Amount of p
Person Who Was Paid			made	
Number Street				\$
Number Street				\$
				\$ \$
City State ZIP Co.				\$ \$
City State ZIP Co ithin 2 years before you filed for bar	nkruptcy, did you sell, trade, or otherwise	e transfer any prop	erty to anyone, other that	\$ \$ an property
City State ZIP Co ithin 2 years before you filed for bar ansferred in the ordinary course of y clude both outright transfers and transf	nkruptcy, did you sell, trade, or otherwise your business or financial affairs? fers made as security (such as the granting			
City State ZIP Co- ithin 2 years before you filed for bar ansferred in the ordinary course of y clude both outright transfers and trans o not include gifts and transfers that yo	nkruptcy, did you sell, trade, or otherwise your business or financial affairs?			
City State ZIP Co- ithin 2 years before you filed for bar ansferred in the ordinary course of y clude both outright transfers and trans- p not include gifts and transfers that you No	nkruptcy, did you sell, trade, or otherwise your business or financial affairs? fers made as security (such as the granting			
City State ZIP Co- ithin 2 years before you filed for bar ansferred in the ordinary course of y clude both outright transfers and transf	nkruptcy, did you sell, trade, or otherwise your business or financial affairs? fers made as security (such as the granting bu have already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). Date tra
City State ZIP Co ithin 2 years before you filed for bar ansferred in the ordinary course of y clude both outright transfers and transf o not include gifts and transfers that you No Yes. Fill in the details.	nkruptcy, did you sell, trade, or otherwise your business or financial affairs? fers made as security (such as the granting bu have already listed on this statement.	of a security interes	st or mortgage on your pro	perty). Date tra
City State ZIP Co- ithin 2 years before you filed for bar ansferred in the ordinary course of y clude both outright transfers and trans- p not include gifts and transfers that you No	nkruptcy, did you sell, trade, or otherwise your business or financial affairs? fers made as security (such as the granting bu have already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty).
City State ZIP Co ithin 2 years before you filed for bar ansferred in the ordinary course of y clude both outright transfers and transf o not include gifts and transfers that you No Yes. Fill in the details.	nkruptcy, did you sell, trade, or otherwise your business or financial affairs? fers made as security (such as the granting bu have already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). Date tra
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Debtor 1 First Name Middle Name Last N	lame	Case number (if known	n)	
 19. Within 10 years before you filed for bankrup are a beneficiary? (These are often called as No Yes. Fill in the details. 		ty to a self-settled trust	or similar device of w	hich you
	Description and value of the prope	rty transferred		Date transfer was made
Name of trust	-			
 Part 8: List Certain Financial Accounts 20. Within 1 year before you filed for bankrupter closed, sold, moved, or transferred? Include checking, savings, money market, brokerage houses, pension funds, cooperation No No Yes. Fill in the details. 	cy, were any financial accounts o or other financial accounts; certi	or instruments held in y	our name, or for your	
	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
Name of Financial Institution Number Street	XXXX	 Checking Savings Money market Brokerage 		\$
City State ZIP Code	xxxx	Other Checking		\$
Number Street		Savings Money market Brokerage Other		
City State ZIP Code 21. Do you now have, or did you have within 1 securities, cash, or other valuables? No Yes. Fill in the details.	year before you filed for bankrup		ox or other depository	r for
	Who else had access to it?	Describe the	contents	Do you still have it?
Name of Financial Institution	Name			No Yes
Number Street	Number Street			
City State ZIP Code	City State ZIP Code			

Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Image of Storage Facility Number Streat Number Streat Number Streat Op 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 Image of Storage Facility Number Streat Op out hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. <th>2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Image: Provide the storage Facility Ima</th> <th>btor 1</th> <th>Last Name</th> <th>Case number (if known)</th> <th></th>	2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Image: Provide the storage Facility Ima	btor 1	Last Name	Case number (if known)	
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Image: Set in the details. Whe else has or had access to it? Describe the contents Do you still not be contents Name of Storage Facility Name Name No Number Street Dity State 2P Code Dity State 2P Code No 12 Identify Property You Hold or Control for Someone Else No No 13 Identify Property You Hold or Control for Someone Else No 14 29 Identify Property You Hold or Control for Someone Else No 14 29 Identify Property You Hold or Control for Someone Else No 15 29 Identify Property You Hold or Control for Someone Else No 16 Yess Fill in the details. Where is the property? Describe the property Value 16 Yess Fill In the details. Where is the property? Describe the property Value 17 7 Base 2P Code S S 16 Yess Fill In the details. Image: Street S Street S 16 Owner's Mame Street Street Street Street Street S 16 Owner's Mame	Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you hold or contents Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or one of the transfer of the testals. 0 No No No 0 Yes. Fill in the details. Where is the property? Describe the property Value 0 Yes. Fill in the details. Where is the property? Describe the property Value 0 Yes. Fill in the details. Where is the property? Describe the property Value 0 Yes. Fill in the details. Where is the property? Describe the property Value 0 Yes. Fill in the details. Where is the property? Describe the property Value 0 Yes. Fill in the details. Where is the property? Describe the property Value 0 Yes. Fill in the details. Where is the property? Describe the property as defined under any environmental law, whether you now own, operate, or flatcore control ing the feature of these sof hazardous substance, hazardous substance, instance, insta	. Have you stored property in a storage	unit or place other than your home within a	year before you filed for bankruptc	y?
Who olse has or had access to K? Describe the contents Do prove all hows it? Name of Storage Facility Name Name No Name Number Street Number Street No City State 2P Code No It option to control any property that someone else owns? Include any property you borrowed from, are storing for. No It option to control any property that someone else owns? Include any property you borrowed from, are storing for. No It option to control any property that someone else owns? Include any property you borrowed from, are storing for. No It option Number Street Number Street Street Street Street Street Street Street Street Number Street Street Number Street Street Number Street Street Number Street Street Street	Who else has or had access to it? Describe the contents Describe the content set of the co				
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Number Street	Image: Street Number Street Interface City State ZP Code Art 9: Mentify Property You Hold or Control for Someone Else Interface City State ZP Code Prove Fill in the details. Interface Number Interface Number Summer States Interface Number Interface Number Street Interface Number Street Interface Number Street Interface Number Street				🗖 No
City State ZP Code Sume City State ZP Code State Code Code Code C		Name of Storage Facility	Name		🗖 Yes
City State ZP Code Sume City State ZP Code State Code Code Code C		Number Street	Number Street		
city state 2P Code art 9: dentify Property You Hold or Control for Someone Else 0: op 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. op 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. 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0 0: 0 0	city text 2P Code ext 9 Identify Property You Hold or Control for Someone Else • ob 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. • ob • No • ob • observice in the details. • observice in the details. • Owner's Name • with the details. • observice in the details. • observice in the details. • Owner's Name • with the street • observice in the observice in the observice in the property? • Describe the property Value • Owner's Name • with the street • observice in the observice in the observice in the property? • Observice in the observi				
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Number Street Number Street	Number Street City State		Governmental unit En	vironmental law, if you know it	Date of notice
Number Street Number Street	Number Street City State				
	City State ZIP Code	Name of site	Governmental unit		
	City State ZIP Code				
City State ZIP Code		Number Street	Number Street		
			City State ZIP Code		

ebtor 1		Case number (if known	n)
First Name Middle Name La	ast Name		
5. Have you notified any governmental unit	of any release of hazardous mater	ial?	
Yes. Fill in the details.			
	Governmental unit	Environmental law, if yo	bu know it Date of notice
Name of site	Governmental unit		· · · · · · · · · · · · · · · · · · ·
		_	
Number Street	Number Street		
	City State ZIP Code	-	
0//// 7/0.0-/-			
City State ZIP Code			
6. Have you been a party in any judicial or a	administrative proceeding under a	v environmental law? Ir	nclude settlements and orders
		,	
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the case
			Last
Case title			Pending
	Court Name		-
			On appeal
	Number Street		Concluded
Case number	City State ZIP Co	ode	
Part 11: Give Details About Your B	usiness or Connections to An	v Business	
27. Within 4 years before you filed for bankr			a connections to any husiness?
A sole proprietor or self-employe			
A member of a limited liability control	-		
A partner in a partnership			
An officer, director, or managing	executive of a corporation		
	-		
An owner of at least 5% of the vo	ting or equity securities of a corpo	ration	
No. None of the above applies. Go to	Part 12.		
Yes. Check all that apply above and		siness.	
	Describe the nature of the busine		ployer Identification number
	_		not include Social Security number or ITIN.
Business Name			
		EIN	l:
Number Street			
	Name of accountant or bookkeep	er Dat	es business existed
	-		
		Fro	om To
City State ZIP Code	—		
	Describe the nature of the busine	ss Em	ployer Identification number
Business Name		Do	not include Social Security number or ITIN.
Business Hallie			
		EIN	l:
Number Street	Name of accountant or backless	or Det	os husinoss ovictod
	Name of accountant or bookkeep	Dat	es business existed
	—		
		Fro	om To
City State ZIP Code			

First Name Middle Name Las	st Name Case number (if known)	
	Describe the nature of the business Employer Identi	
Business Name		Social Security number or ITIN
	EIN:	·
Number Street	Name of accountant or bookkeeper Dates business	existed
	-	
City State ZIP Code	From	То
ithin 2 years before you filed for bankru stitutions, creditors, or other parties.	uptcy, did you give a financial statement to anyone about your busine	ess? Include all financial
-		
No Yes. Fill in the details below.		
res. Fill in the details below.		
	Date issued	
Name	MM / DD / YYYY	
Number Street	_	
	_	
City State ZIP Code		
City State ZIP Code		
City State ZIP Code		
City State ZIP Code		
12: Sign Below	ent of Financial Affairs and any attachments, and I declare under pen	alty of perjury that the
12: Sign Below have read the answers on this <i>Stateme</i> nswers are true and correct. I understa	ent of Financial Affairs and any attachments, and I declare under pen and that making a false statement, concealing property, or obtaining	money or property by frau
12: Sign Below have read the answers on this <i>Stateme</i> nswers are true and correct. I understa		money or property by frau
12: Sign Below have read the answers on this <i>Stateme</i> inswers are true and correct. I understa in connection with a bankruptcy case ca	and that making a false statement, concealing property, or obtaining	money or property by frau
12: Sign Below have read the answers on this <i>Stateme</i> nswers are true and correct. I understan n connection with a bankruptcy case ca 8 U.S.C. §§ 152, 1341, 1519, and 3571.	and that making a false statement, concealing property, or obtaining an result in fines up to \$250,000, or imprisonment for up to 20 years,	money or property by frau
12: Sign Below have read the answers on this Stateme nswers are true and correct. I understan o connection with a bankruptcy case ca 8 U.S.C. §§ 152, 1341, 1519, and 3571.	and that making a false statement, concealing property, or obtaining an result in fines up to \$250,000, or imprisonment for up to 20 years,	money or property by frau
12: Sign Below have read the answers on this <i>Stateme</i> nswers are true and correct. I understan n connection with a bankruptcy case ca 8 U.S.C. §§ 152, 1341, 1519, and 3571.	and that making a false statement, concealing property, or obtaining an result in fines up to \$250,000, or imprisonment for up to 20 years,	money or property by frau
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12: Sign Below have read the answers on this Statemenswers are true and correct. I understant connection with a bankruptcy case case U.S.C. §§ 152, 1341, 1519, and 3571. X Signature of Debtor 1 Date Did you attach additional pages to Your No	and that making a false statement, concealing property, or obtaining an result in fines up to \$250,000, or imprisonment for up to 20 years, 	money or property by frau or both.
12: Sign Below have read the answers on this Statemenswers are true and correct. I understant connection with a bankruptcy case case 8 U.S.C. §§ 152, 1341, 1519, and 3571. X Signature of Debtor 1 Date Did you attach additional pages to Your No	and that making a false statement, concealing property, or obtaining an result in fines up to \$250,000, or imprisonment for up to 20 years, 	money or property by frau or both.
12: Sign Below have read the answers on this Statemenswers are true and correct. I understant connection with a bankruptcy case case U.S.C. §§ 152, 1341, 1519, and 3571. X Signature of Debtor 1 Date Did you attach additional pages to Your No Yes	and that making a false statement, concealing property, or obtaining an result in fines up to \$250,000, or imprisonment for up to 20 years, Signature of Debtor 2 Date Statement of Financial Affairs for Individuals Filing for Bankruptcy (money or property by frau or both.
12: Sign Below have read the answers on this Statements in connection with a bankruptcy case case 8 U.S.C. §§ 152, 1341, 1519, and 3571. X Signature of Debtor 1 Date Did you attach additional pages to Your No Yes Did you pay or agree to pay someone with	and that making a false statement, concealing property, or obtaining an result in fines up to \$250,000, or imprisonment for up to 20 years, 	money or property by frau or both.
12: Sign Below have read the answers on this Statements n connection with a bankruptcy case case a U.S.C. §§ 152, 1341, 1519, and 3571. X Signature of Debtor 1 Date Did you attach additional pages to Your No Yes Did you pay or agree to pay someone will No	and that making a false statement, concealing property, or obtaining an result in fines up to \$250,000, or imprisonment for up to 20 years, Signature of Debtor 2 Date Statement of Financial Affairs for Individuals Filing for Bankruptcy (money or property by frau or both. Official Form 107)?

	United	States Bankruptcy Co	ourt
In re			Case No
	Debtor		Chapter
[Mu.		NSATION OF BANKRUPTCY PI ruptcy petition preparer prepares the	
1.	attorney, that I prepared or cause debtor(s) in connection with this b the filing of the bankruptcy petit	d to be prepared one or more docur ankruptcy case, and that compensati	m not an attorney or employee of an ments for filing by the above-named on paid to me within one year before r services rendered on behalf of the e is as follows:
For doc	cument preparation services I have a	greed to accept	\$
Prior to	the filing of this statement I have re	eceived	\$
Balance	e Due		\$
2.	I have prepared or caused to be pre-	epared the following documents (iter	nize):
and pro	vided the following services (itemiz	e):	
3.	The source of the compensation pa Debtor	aid to me was: Other (specify)	
4.	The source of compensation to be Debtor	paid to me is: Other (specify)	
5.	The foregoing is a complete state of the petition filed by the debtor(ent for payment to me for preparation
6.	To my knowledge no other persor this bankruptcy case except as list		ocument for filing in connection with
NAME		SOCIAL SECURITY NUMBER	
	Signature	Social Security number of bankrup petition preparer*	otcy Date
	name and title, if any, of ptcy Petition Preparer	Address	

* If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. § 110).

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Fill in this information to identify the case:							
Debtor 1							
Debtor 2 (Spouse, if filing) First Name		Middle Name	Last Name				
United States Bankruptcy Court for the:District of							
Case number Chapter (If known)							

Official Form 119 Bankruptcy Petition Preparer's Notice, Declaration, and Signature

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 2. 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
	1101100		

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
any maximum allowable fee before preparing any document for filing or a	ccepting any fee.
Signature of Debtor 1 acknowledging receipt of this notice	Date MM / DD / YYYY
Signature of Debtor 2 acknowledging receipt of this notice	Date MM / DD / YYYY

12/15

First Name Middle Name Last Name

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 document of the document of the constant of the cons	nents checke	ed below and the	completed declaration is	mad	e a part of each document that I check
Voluntary Petition (Form 101)		Schedule I (F	orm 106l)		Chapter 11 Statement of Your Current Monthl
Statement About Your Social Sec	urity Numbers	Schedule J (F	Form 106J)		Income (Form 122B) Chapter 13 Statement of Your Current Monthl
(Form 121)		Declaration A Schedules (F	bout an Individual Debtor's form 106Dec)		Income and Calculation of Commitment Perio (Form 122C-1)
Certain Statistical Information (Fo	rm 106Sum)	Statement of	Financial Affairs (Form 107)		Chapter 13 Calculation of Your Disposable
Schedule A/B (Form 106A/B)			Intention for Individuals Filing		Income (Form 122C-2)
Schedule C (Form 106C)		· ·	er 7 (Form 108)		Application to Pay Filing Fee in Installments (Form 103A)
Schedule D (Form 106D)			atement of Your Current me (Form 122A-1)		Application to Have Chapter 7 Filing Fee
Schedule E/F (Form 106E/F)		Statement of Exemption from Presumption		_	Waived (Form 103B)
Schedule G (Form 106G)		of Abuse Und (Form 122A-1	buse Under § 707(b)(2) m 1224-1Supp)		A list of names and addresses of all creditors (creditor or mailing matrix)
Schedule H (Form 106H)		Chapter 7 Me	eans Test Calculation 2)		Other

to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110.

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

United States Bankruptcy Court

	District Of
In 1	re
	Case No
Del	btor Chapter
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept
	Prior to the filing of this statement I have received
	Balance Due
2.	The source of the compensation paid to me was:
	Debtor Other (specify)
3.	The source of compensation to be paid to me is:
	Debtor Other (specify)
4.	\Box I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	\Box I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Date

Signature of Attorney

Name of law firm

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
Debtor(s) appearing without an attorney	
Attorney for Debtor(s)	
UNITED STATES B CENTRAL DISTRICT OF CALIFOR	ANKRUPTCY COURT NIA - DIVISION
In re:	CASE NO.:
	CHAPTER:
	DECLARATION BY DEBTOR(S) AS TO WHETHER INCOME WAS RECEIVED FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION DATE [11 U.S.C. § 521(a)(1)(B)(iv)]
Debtor(s).	[No hearing required]
Debtor(s) provides the following declaration(s) as to whethe Debtor(s) filing this bankruptcy case (Petition Date), as requ	r income was received from an employer within 60 days of the ired by 11 U.S.C. § 521(a)(1)(B)(iv):
1. I am Debtor 1 in this case, and I declare under pena	Ity of perjury that the following information is true and correct:
During the 60-day period before the Petition Date	e (<u>Check only ONE box below</u>):
employment income I received from my employ	es of all statements of earnings, pay stubs, or other proof of er during this 60-day period. (<i>If the Debtor's social security</i> er proof of income, the Debtor must cross out (redact) the
I was not paid by an employer because I was	either self-employed only, or not employed.

Printed name of Debtor 1

Signature of Debtor 1

Declaration of Debtor 2 (Joint Debtor) (if applicable)

2. I am Debtor 2 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

□ I was paid by an employer. Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60 day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)

I was not paid by an employer because I was either self-employed only, or not employed.

Date:

Printed name of Debtor 2

Signature of Debtor 2

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

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 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.	What is your marital and filing status? Check one only. A Not married. Fill out Column A, lines 2-11.					
	A 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 August 31. If the amount of your monthly income varied dur the result. Do not include any income amount more than on from that property in one column only. If you have nothing to	ou are filing ing the 6 mo ce. For exa	on Septembe onths, add the mple, if both s	r 15, the income spouses o	6-month period would for all 6 months and own the same rental p	d be March 1 through divide the total by 6. Fill in
					Column A Debtor 1	<i>Column B</i> Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and payroll deductions).	commissio	ns (before all		\$	\$
3.	Alimony and maintenance payments. Do not include pay	ments from	a spouse.		\$	\$
4.	All amounts from any source which are regularly paid for you or your dependents, including child support. Includ an unmarried partner, members of your household, your de roommates. Do not include payments from a spouse. Do not listed on line 3.	e regular co pendents, p	ntributions fro arents, and		\$	\$
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	- \$	- \$			
	Net monthly income from rental or other real property	\$	\$	Copy here →	\$	\$

Debtor	1
--------	---

Last Name

		Column A Debtor 1	<i>Column B</i> 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.	\$	¢	
		¢.	۵ <u>ــــــ</u>	
		Φ	\$	
	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.	\$	+ \$	S
Pa	art 2: Determine How to Measure Your Deductions from Income			
12.	Copy your total average monthly income from line 11.			¢
	Calculate the marital adjustment. Check one:			Φ
10.	□ 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.			
	Below, specify the basis for excluding this income and the amount of income devote list additional adjustments on a separate page.	ed to each purpose.	If necessary,	
	If this adjustment does not apply, enter 0 below.			
		\$	_	
		\$	_	
		+ \$	-	
	Total	. \$	- Copy here 🗲	_
			Copy nere 🔽	

Debtor 1 Case number (if known)	
First Name Middle Name Last Name	
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.	s
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 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122)	
17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determine</i> 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 12) 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.	\$
 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. 	y
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	s
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, <i>The commitment period is 3 years</i> . Go to Part 4.	

	First Name Middle Name Last Name	Case number (if known)
	20b is more than or equal to line 20c. Unless ot a box 4, <i>The commitment period is 5 years</i> . Go	therwise ordered by the court, on the top of page 1 of this form, to Part 4.
Part 4:	Sign Below	
1		
l	By signing here, under penalty of perjury i deci	lare that the information on this statement and in any attachments is true and correct.
I	Sy signing here, under penalty of perjury i deci	
I	Signature of Debtor 1	are that the information on this statement and in any attachments is true and correct.
	×	×

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 I	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

04/25

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

				EE VOORO O	of age					
Р	eople	e who a	re under	os years o						
7	′a. Ou	ut-of-po	cket healt	n care allow	vance per perso	on \$				
7	′b. Nu	umber o	f people v	/ho are unc	der 65	x				
7	′c. Su	ubtotal.	Multiply li	e 7a by lin	e 7b.	\$	Copy here	\$		
	Peopl	le who	are 65 ye	ars of age	or older					
7	d. Ou	ut-of-po	cket healt	n care allow	vance per perso	on \$				
7	′e. Nu	umber o	f people v	ho are 65	or older	x				
7	′f. Su	ubtotal.	Multiply li	e 7d by lin	e 7e.	\$	Copy here➔	+ \$		
7g. T	otal. A	Add line	s 7c and	7f				. \$	Copy here ➔	\$
.ocal Standa	rds	You n	nust use t	ne IRS Loc	al Standards to	answer the questions	s in lines 8-	15.		
					U.S. Trustee P	Program has divided	the IRS Lo	ocal Standard for	housing for	
	• •	-	s into two	•	l operating av					
	-				d operating ex ent expenses	penses				
						stee Program chart.				
oecifie	d in th	he sepa	rate inst	uctions fo	or this form. Th	is chart may also be	available	at the bankruptcy	/ clerk's office.	
ecifie Hous	d in th ing ar	he sepa nd utilit	rate inst ies – Ins	uctions fo	or this form. Th d operating exp		e available mber of pe	at the bankruptcy	/ clerk's office.	\$
Hous Hous	d in th ing ar e dollar	he sepa nd utilit ar amoui	rate inst ies – Ins nt listed fo	uctions fo Irance and r your cour	or this form. Th d operating exp	is chart may also be penses: Using the nu e and operating exper	e available mber of pe	at the bankruptcy	/ clerk's office.	\$
Hous in the Hous	d in th ing ar dollar ing ar Đa. Usi	he sepa nd utilit ar amoun nd utilit sing the	rate inst ies – Ins nt listed fo ies – Mo number o	uctions fo irance and r your cour tgage or re people you	or this form. The d operating exp nty for insurance ent expenses:	is chart may also be penses: Using the nu e and operating exper e 5, fill in the dollar am	e available mber of pe nses.	at the bankruptcy	/ clerk's office.	\$
Hous in the Hous	d in th ing ar dollar ing ar Đa. Usi list	he sepa nd utilit ar amoun nd utilit sing the ited for y	rate inst ies – Ins It listed for ies – Mo number o our count age month	uctions fo Irance and r your cour tgage or re people you y for mortg	or this form. The d operating exp nty for insurance ent expenses: u entered in line age or rent exp	is chart may also be penses: Using the nu e and operating exper e 5, fill in the dollar am	e available mber of pe ises.	at the bankruptcy	/ clerk's office.	\$
Hous in the Hous	d in th ing ar dollar ing ar Ja. Usi list Jb. Tot you To cor	he sepa nd utilit ar amount nd utilit sing the ted for y atal avera- our home o calcula ontractua	rate inst ies – Ins it listed for ies – Mo number o our count age month age month te the tota illy due tota	uctions fo urance and r your cour tgage or ro people you y for mortgan ily paymen al average r	or this form. The d operating exp nty for insurance ent expenses: u entered in line age or rent exp t for all mortgage monthly payme red creditor in t	is chart may also be penses: Using the nu e and operating exper e 5, fill in the dollar an enses.	e available mber of pe nses. nount ecured by at are	at the bankruptcy	/ clerk's office.	\$
Hous in the Hous	d in th ing ar dollar ing ar Ja. Usi list Jb. Tot you To cor	he sepa nd utilit ar amount nd utilit sing the ted for y tal avera- bur home o calcula ontractua r bankru	rate inst ies – Ins it listed for ies – Mo number o our count age month age month te the tota illy due tota	uctions fo urance and r your cour tgage or re people you y for mortg. Ily payment al average r each secur t divide by (or this form. The d operating exp nty for insurance ent expenses: u entered in line age or rent exp t for all mortgage monthly payme red creditor in t	is chart may also be penses: Using the nu e and operating exper e 5, fill in the dollar an enses. ges and other debts so nt, add all amounts th	e available mber of pe nses. nount ecured by at are nu file	at the bankruptcy	/ clerk's office.	\$
Hous in the Hous	d in th ing ar dollar ing ar Ja. Usi list Jb. Tot you To cor	he sepa nd utilit ar amount nd utilit sing the ted for y tal avera- bur home o calcula ontractua r bankru	rate inst ies – Ins it listed for ies – Mo number o our count age month age month te the tot: illy due to ptcy. Nex	uctions fo urance and r your cour tgage or re people you y for mortg. Ily payment al average r each secur t divide by (or this form. The d operating exp nty for insurance ent expenses: u entered in line age or rent exp t for all mortgage monthly payme red creditor in t	is chart may also be penses: Using the nu e and operating exper e 5, fill in the dollar an enses. ges and other debts so nt, add all amounts th he 60 months after yo	e available mber of pe nses. nount ecured by at are nu file	at the bankruptcy	/ clerk's office.	\$
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Middle Name Last Name

. Local transporta	ation expenses: Check the numb	per of vehicles for which	ı you claim a	an ownership o	r operating expense.	
-	o line 14. o line 12.					
2 or mo	ore. Go to line 12.					
	on expense: Using the IRS Local the Operating Costs that apply for					\$
each vehicle belo	hip or lease expense: Using the ow. You may not claim the expen y not claim the expense for more	se if you do not make a				
Vehicle 1	Describe Vehicle 1:					
13a. Ownership	or leasing costs using IRS Local	Standard		\$		
-	onthly payment for all debts secu ude costs for leased vehicles.	red by Vehicle 1.				
add all amo	e the average monthly payment h ounts that are contractually due to he 60 months after you file for ba	each secured				
Name of e	ach creditor for Vehicle 1	Average monthly payment				
		\$				
	Total average monthly payment	+ \$ \$	Copy here➔	- \$	Repeat this amount on line 33b.	
	e 1 ownership or lease expense e 13b from line 13a. If this numbe	er is less than \$0, enter	\$0	\$	Copy net Vehicle 1 expense here	\$
Vehicle 2	Describe Vehicle 2:					
12d Ownorship	or leasing costs using IRS Local	Standard				
13e. Average mo	onthly payment for all debts secur ude costs for leased vehicles.			\$	_	
Name of e	ach creditor for Vehicle 2	Average monthly payment				
		\$ + s				
	Total average monthly paymen	t	Copy here →	- \$	Repeat this amount on line 33c.	
	e 2 ownership or lease expense le 13e from 13d. If this number is	less than \$0, enter \$0		\$	Copy net Vehicle 2 expense here	\$
	tation expense: If you claimed expense allowance regardless				lards, fill in the <i>Public</i>	\$
deduct a public t	ic transportation expense: If yo ransportation expense, you may S Local Standard for <i>Public Tran</i>	fill in what you believe is				\$

Debtor	1					Case number (if known)	
	Other N Expens	First Name	In addition to following IRS		deductions listed	above, you are allowed your monthly expenses for the	
	Taxes self-e from y refund	s: The total m mployment ta your pay for th d by 12 and s	ionthly amount th ixes, social secur nese taxes. Howe	at you actually ity taxes, and ever, if you export from the to	Medicare taxes. pect to receive a	state and local taxes, such as income taxes, You may include the monthly amount withheld tax refund, you must divide the expected int that is withheld to pay for taxes.	\$
17.		u ntary deduc dues, and ur		monthly payrc	oll deductions that	t your job requires, such as retirement contributions,	
	Do no	ot include amo	ounts that are not	required by y	our job, such as v	voluntary 401(k) contributions or payroll savings.	\$
18.	togeth	ner, include p	ayments that you	make for you	r spouse's term li		
		ot include prei surance other		urance on you	r dependents, for	a non-filing spouse's life insurance, or for any form of	\$
19.			yments: The tota bousal or child su			as required by the order of a court or administrative	\$
	Do no	ot include pay	ments on past du	e obligations	for spousal or chi	Id support. You will list these obligations in line 35.	
20.	∎ as	a condition fo	r your job, or	, , , , , , , , , , , , , , , , , , ,		nat is either required:	\$
	■ for	your physical	ly or mentally cha	allenged depe	ndent child if no p	public education is available for similar services.	
21.					y for childcare, su econdary school e	ch as babysitting, daycare, nursery, and preschool. education.	\$
22.	requir	ed for the heat	alth and welfare of	of you or your	dependents and	The monthly amount that you pay for health care that is that is not reimbursed by insurance or paid by a health al entered in line 7.	
		-	•			be listed only in line 25.	\$
23.	for yo phone incom Do no	u and your de e service, to the ne, if it is not r ot include pay	ependents, such he extent necess eimbursed by yo ments for basic h	as pagers, cal ary for your he ur employer. ome telephon	l waiting, caller id ealth and welfare le, internet or cell	amount that you pay for telecommunication services lentification, special long distance, or business cell or that of your dependents or for the production of phone service. Do not include self-employment y amount you previously deducted.	+ \$
24.		all of the exp nes 6 through		inder the IRS	expense allowa	nces.	\$
	dditio educt	nal Expense ions				d by the Means Test. vances listed in lines 6-24.	
25.	insura					ount expenses. The monthly expenses for health re reasonably necessary for yourself, your spouse, or	
	Healt	h insurance			\$		
	Disat	oility insurance	е		\$		
		h savings acc		+	\$		
	Total	U			\$	Copy total here →	\$
	Do yo	ou actually sp	end this total am	∟ ount?		1	
	-		do you actually s	pend?			
					\$		
26.	contir your l	nue to pay for household or	the reasonable a member of your	and necessary mmediate fan	care and suppor	t of an elderly, chronically ill, or disabled members that you will t of an elderly, chronically ill, or disabled member of to pay for such expenses. These expenses may 26 U.S.C. § 529A(b).	\$
27.	you a	nd your famil	y under the Fami	ly Violence Pr		nonthly expenses that you incur to maintain the safety o vices Act or other federal laws that apply. tial.	f \$

Last Name

28.	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.	29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$214.58* 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.								
		ject to adjustment on 4/01/28, and every 3	2		ter the date of adjust	ment.			
30.	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.	instrur	nuing charitable contributions. The amonents to a religious or charitable organization include any amount more than 15% of your sector of the	on. 11 U.S.C. § 548(d)(3)		the form of cash or	financial	+ \$		
32.		Il of the additional expense deductions nes 25 through 31.					\$		
D	educti	ons for Debt Payment							
33.	loans To cal	ebts that are secured by an interest in p and other secured debt, fill in lines 33 culate the total average monthly payment, h secured creditor in the 60 months after y	a through 33e. add all amounts that are o	contractually du	e	3			
		,		,	Average monthly payment				
	Morte	ages on your home			payment				
	33a. (Copy line 9b here		→	\$				
	Loan	s on your first two vehicles							
	33b. (Copy line 13b here		→	\$				
	33c. (Copy line 13e here.		→	\$				
	33d.	List other secured debts:							
		Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?					
				No Yes	\$				
				No Ves	\$				
				D No	+ \$				
	33e	Total average monthly payment. Add lines	33a through 33d		\$	Copy total here	\$		

34. Are a	any debts that you listed in line	33 secured by your prin	narv residence.	a vehicle. c	or other property nece	ssarv	
	our support or the support of y			, -			
	Io. Go to line 35.						
 Y	es. State any amount that you mu possession of your property (ust pay to a creditor, in ad- called the <i>cure amount</i>). N	dition to the payn lext, divide by 60	nents listed and fill in th	in line 33, to keep ne information below.		
	Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount		
			\$	÷ 60 =	\$		
			\$	÷ 60 =	\$		
			\$	÷ 60 = ·	+ \$		
				Total	\$	Copy total here➔	\$
the f	ou owe any priority claims—su iling date of your bankruptcy ca lo. Go to line 36. 'es. Fill in the total amount of all o	ase? 11 U.S.C. § 507. f these priority claims. Do	not include curre	-	at are past due as of		
	ongoing priority claims, such a Total amount of all past-due				\$	÷ 60	\$
					*		-
36. Proje	ected monthly Chapter 13 plan p	payment			\$		
Office	ent multiplier for your district as sta of the United States Courts (for of xecutive Office for United States	districts in Alabama and N	lorth Carolina) or	by			
speci	d a list of district multipliers that ir fied in the separate instructions for ruptcy clerk's office.			k	x		
Avera	age monthly administrative expens	se			\$	Copy total here➔	\$
37. Add a	all of the deductions for debt pa	ayment. Add lines 33e thr	ough 36.			[\$
Total D	eductions from Income					_	
	all of the allowed deductions.						
	line 24, All of the expenses allow	ed under IRS expense allo	owances		\$		
	line 32, All of the additional exper						
	line 37, All of the deductions for a						
Total	deductions				\$	Copy total here	\$
rotal					φ	here 🗲	Φ

Deb	otor 1	First Name	Middle Name	Last Name		Case number	(if known)		
Pa	rt 2:	Determine	e Your Disposal	ole Income Under	11 U.S.C. § 1325	(b)(2)			
39.	Copy you Statemer	ur total curre nt of Your Cu	ent monthly incon urrent Monthly Inc	ne from line 14 of Fo come and Calculatio	orm 122C-1, Chapter on of Commitment Pe	13 eriod.			\$
40.	children. disability received i	The monthly payments for in accordance	average of any ch a dependent child	ild support payments , reported in Part I of onbankruptcy law to t	upport for dependen , foster care payments Form 122C-1, that yo he extent reasonably	s, or			
41.	employer specified	withheld fron in 11 U.S.C.	n wages as contrib	utions for qualified re I required repayments	of all amounts that yo tirement plans, as s of loans from retirem	¢			
42.	Total of a	all deduction	s allowed under	11 U.S.C. § 707(b)(2)	(A). Copy line 38 here	e			
43.	expenses and their	and you hav expenses. Yo	e no reasonable a ou must give your o	If special circumstance Iternative, describe th case trustee a detailed n for the expenses.	e special circumstanc	es			
	Describe	the special ci	rcumstances		Amount of expense				
					\$				
					\$				
				Total	+ \$ \$	Copy here			
44.	Total adj	ustments. A	dd lines 40 through	1 43			Сору І	here 🗲	- \$
45.	Calculate	e your month	nly disposable inc	come under § 1325(b	b)(2). Subtract line 44	from line 39.			\$
Ра	rt 3:	Change ii	n Income or Ex	penses					
46.	or are virt open, fill i 122C-1 in	tually certain t in the informa in the first colu	to change after the ition below. For exa	e date you filed your b ample, if the wages re the second column, e	-1 or the expenses yo ankruptcy petition and eported increased after explain why the wages	d during the time yer you filed your p	our case will be /our case will be		
	Form	Line	Reason for chang	je	Date of change	Increase or decrease?	Amount of chan	ige	
	122C-122C-					Increase	\$	-	
	122C-122C-					Increase	\$	-	
	122C-122C-					IncreaseDecrease	\$	-	
	122C-122C-					IncreaseDecrease	\$	-	
L									

Debtor 1				Case number (if known)
	First Name	Middle Name	Last Name	
Part 4:	Sign Belo	w		
By signing he	ere, under pe	nalty of perjury	you declare that the in	formation on this statement and in any attachments is true and correct.
X				×
Signature o	of Debtor 1			Signature of Debtor 2
Date				Date
	DD / YYY	Y		Date

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
 Debtor(s) appearing without attorney Attorney for Debtor 	
	ANKRUPTCY COURT LIFORNIA - <u>Name of</u> DIVISION
In re:	CASE NO.: CHAPTER:
Debtor(s).	VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]
Debior(s).	

Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of _____ sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date:	Signature of Debtor 1
Date:	Signature of Debtor 2 (joint debtor) (if applicable)
Date:	Signature of Attorney for Debtor (if applicable)

This form is optional. It has been approved for use in the United States Bankruptcy Court for the Central District of California

Attorney or Party Name, Address, Telephone & FAX Numbers, State Bar Number & Email Address	FOR COURT USE ONLY
 Debtor appearing without attorney Attorney for Debtor 	
UNITED STATES BA CENTRAL DISTRICT OF CALIFORNIA	NKRUPTCY COURT
List all names (including trade names) used by Debtor within the last 8 years.	CASE NUMBER: CHAPTER 13
In re:	CHAPTER 13 PLAN Original 1 st Amended* 2 nd Amended* Amended* *list below which sections have been changed:
	[FRBP 3015(b); LBR 3015-1]
	11 U.S.C. SECTION 341(a) CREDITORS' MEETING: Date: Time: Address: PLAN CONFIRMATION HEARING: [LBR 3015-1(d)] Date: Time: Address:
Debtor(s).	

"Bankruptcy Code" and "11 U.S.C." refer to the United States Bankruptcy Code, Title 11 of the United States Code. "FRBP" refers to the Federal Rules of Bankruptcy Procedure. "LBR" and "LBRs" refer to the Local Bankruptcy Rule(s) of this court.

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

Part 1: PRELIMINARY INFORMATION

TO DEBTOR (the term "Debtor" includes and refers to both spouses as Debtors in a joint bankruptcy case): This Chapter 13 Plan (Plan) sets out options that may be appropriate in some cases, but the presence of an option in this Plan does not indicate that the option is appropriate, or permissible, in your situation. A Plan that does not comply with local rules and judicial rulings may not be confirmable. You should read this Plan carefully and discuss it with your attorney if you have one. If you do not have an attorney, you may wish to consult one.

TO ALL CREDITORS: This Plan is proposed by Debtor and your rights may be affected by this Plan. Your claim may be reduced, modified, or eliminated. You should read this Plan carefully and discuss it with your attorney if you have one. If you do not have an attorney, you may wish to consult one.

PLEASE NOTE THAT THE PROVISIONS OF THIS PLAN MAY BE MODIFIED BY ORDER OF THE COURT.

If you oppose this Plan's treatment of your claim or any provision of this Plan, you or your attorney must file a written objection to confirmation of the Plan at least 14 days before the date set for the hearing on confirmation. However, the amounts listed on a proof of claim for an allowed secured or priority claim control over any contrary amounts listed in the Plan. The Bankruptcy Court may confirm this plan without further notice if no objection to confirmation is filed. See FRBP 3015. In addition, you must file a timely proof of claim in order to be paid under any plan. See LBR 3015-1 and FRBP 3002(a).

Defaults will be cured using the interest rate set forth below in the Plan.

The following matters may be of particular importance to you:

Debtor must check one box on each line to state whether or not this Plan includes each of the following items. If an item is checked as "Not included," if both boxes are checked, or neither box is checked, the item will be ineffective if set out later as a provision in this Plan.

- 1.1 Valuation of property and avoidance of a lien on property of the bankruptcy estate, set out in Class 3B and/or Section IV (11 U.S.C. § 506(a) and (d)):
 - □ Included □ Not included
- 1.2 Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in Section IV (11 U.S.C. § 522(f)):

□ Included □ Not included

- 1.3 Less than full payment of a domestic support obligation that has been assigned to a governmental unit, pursuant to 11 U.S.C. §1322(a)(4). This provision requires that payments in Part 2 Section I.A. be for a term of 60 months:
 - □ Included □ Not included
- 1.4 Other Nonstandard Plan provisions, set out in Section IV:
 - □ Included □ Not included

ALL CREDITORS ARE REQUIRED TO FILE A PROOF OF CLAIM IN ORDER TO HAVE AN ALLOWED CLAIM, EXCEPT AS PROVIDED IN FRBP 3002(a). A Debtor whose Plan is confirmed may be eligible thereafter to receive a discharge of debts to the extent specified in 11 U.S.C. § 1328.

Regardless of whether this Plan treats a claim as secured or unsecured, any lien securing such claim is not avoided other than as provided by law or order of the court.

Part 2: PLAN TERMS

Debtor proposes the following Plan terms and makes the following declarations:

Section I. PLAN PAYMENT AND LENGTH OF PLAN

A. Monthly Plan Payments will begin 30 days from the date the bankruptcy petition was filed. If the payment due date falls on the 29th, 30th, or 31st day of the month, payment is due on the 1st day of the following month (LBR 3015-1(k)(1)(A)).

Payments by Debtor of:

\$	per month for months 1 thro	ough tota	aling \$
\$	per month for months	through	totaling \$
\$	per month for months	through	totaling \$
\$	per month for months	through	totaling \$
For a total plan leng	th of months totaling \$		

B. Nonpriority unsecured claims.

The total amount of estimated non-priority unsecured claims is \$______

- 1. Unless otherwise ordered by the court, after Class 1 through Class 4 creditors are paid, allowed nonpriority unsecured claims that are not separately classified (Class 5) will be paid *pro rata* per the option checked below. If both options below are checked, the option providing the largest payment will be effective.
 - a. **"Percentage" plan:** _____% of the total amount of these claims, for an estimated total payment of \$_____.
- 2. Minimum Plan payments. Regardless of the options checked above, payments on allowed nonpriority unsecured claims will be made in at least the greater of the following amounts:
 - a. the sum of \$_____, representing the liquidation value of the estate in a hypothetical Chapter 7 case under 11 U.S.C. § 1325(a)(4), or
 - b. if Debtor has above-median income and otherwise subject to 11 U.S.C. § 1325(b), the sum of \$_____, representing all disposable income payable for 60 months under the means test.
- C. Income tax refunds. Debtor will provide the Chapter 13 Trustee with a copy of each income tax return filed during the Plan term within 14 days of filing the return and, unless the Plan provides 100% payment to nonpriority unsecured creditors (Class 5), will turn over to the Chapter 13 Trustee all federal and state income tax refunds received for the term of the plan. The Debtor may retain a total of \$500 of the sum of the federal and state tax refunds for each tax year. Income tax refunds received by the debtor and turned over to the Chapter 13 Trustee or directly turned over to the Chapter 13 Trustee by the taxing authorities do not decrease the total amount of payments stated in Section I.A., above. The refunds are pledged to the plan in addition to the amounts stated in Section I.A. and can be used by the Chapter 13 Trustee to increase the percentage paid to general unsecured creditors without further order of the Bankruptcy Court.
- D. In the event that secured creditor(s) file a Notice of Postpetition Fees and Costs pursuant to FRBP 3002.1(c), the Chapter 13 Trustee is authorized, but not required, to commence paying those charges 90 days after that notice is filed, unless within that time the Debtor contests those charges by filing a motion to determine payment under FRBP 3002.1(e) or agrees to pay those charges by filing a motion to modify this Plan.

E. Debtor must make preconfirmation adequate protection payments for any creditor that holds an allowed claim secured by personal property where such security interest is attributable to the purchase of such property and preconfirmation payments on leases of personal property whose allowed claim is impaired by the terms proposed in this Plan. Debtor must make preconfirmation adequate protection payments and preconfirmation lease payments to the Chapter 13 Trustee for the following creditor(s) in the following amounts:

Creditor/Lessor Name	Collateral Description	Last 4 Digits of Account #	Amount

Each adequate protection payment or preconfirmation lease payment will accrue beginning the 30th day from the date of filing of the case. The Chapter 13 Trustee must deduct the foregoing adequate protection payment(s) and/or preconfirmation lease payment from Debtor's Plan Payment and disburse the adequate protection payment or preconfirmation lease payment to the secured creditor(s) at the next disbursement or as soon as practicable after the payment is received and posted to the Chapter 13 Trustee's account. The Chapter 13 Trustee will collect his or her statutory fee on all receipts made for preconfirmation adequate protection payments or preconfirmation lease payments.

- F. Debtor must not incur debt greater than \$1,000 without prior court approval unless the debt is incurred in the ordinary course of business pursuant to 11 U.S.C. §1304(b) or for medical emergencies.
- G. The Chapter 13 Trustee is authorized to disburse funds after the date Plan confirmation is announced in open court.
- H. Debtor must file timely all postpetition tax returns and pay timely all postconfirmation tax liabilities directly to the appropriate taxing authorities.
- I. Debtor must pay all amounts required to be paid under a Domestic Support Obligation that first became payable after the date of the filing of the bankruptcy petition.
- J. If the Plan proposes to avoid a lien of a creditor, the Chapter 13 Trustee must not disburse any payments to that creditor on that lien until the Plan confirmation order is entered.
- K. Debtor must pay all required ongoing property taxes and insurance premiums for all real and personal property that secures claims paid under the Plan.

Section II. ORDER OF PAYMENT OF CLAIMS; CLASSIFICATION AND TREATMENT OF CLAIMS:

Except as otherwise provided in this Plan, the Chapter 13 Trustee must disburse all available funds for the payment of claims as follows:

A. ORDER OF PAYMENT OF CLAIMS:

1st If there are Domestic Support Obligations, the order of priority will be:

- (a) Domestic Support Obligations and the Chapter 13 Trustee's fee not exceeding the amount accrued on Plan Payments made to date;
- (b) Administrative expenses (Class 1(a)) until paid in full;

If there are <u>no</u> Domestic Support Obligations, the order of priority will be:

- (a) The Chapter 13 Trustee's fee not exceeding the amount accrued on Plan Payments made to date;
- (b) Administrative expenses (Class 1(a)) until paid in full.
- 2nd Subject to the 1st paragraph, *pro rata* to all secured claims and all priority unsecured claims until paid in full except as otherwise provided in this Plan.
- **3rd** Non-priority unsecured creditors will be paid *pro rata* except as otherwise provided in this Plan. No payment will be made on nonpriority unsecured claims until all the above administrative, secured and priority claims have been paid in full unless otherwise provided in this Plan.

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

B. CLASSIFICATION AND TREATMENT OF CLAIMS:

CLASS 1

ALLOWED UNSECURED CLAIMS ENTITLED TO PRIORITY UNDER 11 U.S.C. §507

Class 1 claims will be paid in full pro rata. Any treatment that proposes to pay claims in Class 1(a) or 1(b) less than in full must be agreed to in writing by the holder of each such claim and specifically addressed in Section IV.D.

Unless otherwise ordered by the court, the claim amount stated on a proof of claim, and the dollar amount of any allowed administrative expense, controls over any contrary amount listed below.

CATEGORY	AMOUNT OF PRIORITY CLAIM	INTEREST RATE, if any	TOTAL PAYMENT
Administrative Expenses			
Chapter 13 Trustee's Fee – estima	ted at 11% of all payme	nts to be made to	all classes through this Plan.
Attorney's Fees			
Chapter 7 Trustee's Fees			
Other			
Other			
Other Priority Claims			
Internal Revenue Service			
Franchise Tax Board			
Domestic Support Obligation			
Other			
	Administrative Expenses Chapter 13 Trustee's Fee – estima Attorney's Fees Chapter 7 Trustee's Fees Other Other Other Other Dther Priority Claims Internal Revenue Service Franchise Tax Board Domestic Support Obligation Other Domestic Support Obligations that ha Plan pursuant to 11 U.S.C. §1322(a) 60 months)	CATEGORY PRIORITY CLAIM Administrative Expenses Administrative Expenses Chapter 13 Trustee's Fee – estimated at 11% of all payme Attorney's Fees Chapter 7 Trustee's Fees Other Other Other Other Priority Claims Internal Revenue Service Franchise Tax Board Domestic Support Obligation Other Domestic Support Obligations that have been assigned to a Plan pursuant to 11 U.S.C. §1322(a)(4) (this provision requit 60 months)	CATEGORYPRIORITY CLAIMRATE, if anyAdministrative ExpensesChapter 13 Trustee's Fee – estimated at 11% of all payments to be made toAttorney's FeesChapter 7 Trustee's FeesOtherOtherOtherOther Priority ClaimsInternal Revenue ServiceFranchise Tax BoardDomestic Support ObligationOtherOtherOtherDomestic Support Obligations that have been assigned to a governmental unitPlan pursuant to 11 U.S.C. §1322(a)(4) (this provision requires that payments

See attachment for additional claims in Class 1.

		CLAS	SS 2			
CLAIMS SECURED SOLELY BY PROPERTY THAT IS DEBTOR'S PRINCIPAL RESIDENCE ON WHICH OBLIGATION MATURES <u>AFTER</u> THE FINAL PLAN PAYMENT IS DUE						
Check one.						
None. If "None" is checked, the rest of this form for Class 2 need not be completed.						
Debtor will maintain and r any changes required by ordered by the court, the specified below. Debtor v Chapter 13 Trustee, with The arrearage amount sta	the applicable se payments will cure the p interest, if an	e contract and noti will be disbursed prepetition arreara y, at the rate state	iced in confor d either by the ages, if any, c ed.	mity with any app e Chapter 13 Tr on a listed claim	blicable rules. U ustee or directl through disbur	nless otherwise y by Debtor, as
NAME OF CREDITOR	LAST 4 DIGITS OF ACCOUNT NUMBER	AMOUNT OF ARREARAGE, IF ANY	INTEREST RATE	ESTIMATED MONTHLY PAYMENT ON ARREARAGE	ESTIMATED TOTAL PAYMENTS	POST- PETITION PAYMENT DISBURSING AGENT
						Debtor
						Debtor
						Trustee
						 Debtor
						Debtor

See attachment for additional claims in Class 2.

CLASS 3A

UNIMPAIRED CLAIMS TO BE PAID DIRECTLY BY DEBTOR

Check one.

None. If "None" is checked, the rest of this form for Class 3A need not be completed.

Debtor will make regular payments, including any preconfirmation payments, directly to the following creditors in accordance with the terms of the applicable contract (Include Creditor Name and Last 4 Digits of Account Number):

The claims of these creditors are unimpaired under the plan.

See attachment for additional claims in Class 3A.

			CL	LASS 3B			
CL				L PROPERTY		TO BE BIFURC	ATED
Check one.							
□ None	. If "None" is ch	ecked, the res	st of this form	for Class 3B ne	ed not be co	mpleted.	
Debto	or proposes:						
Bifurcation of Claims - Dollar amounts/lien avoidance . Except as provided below regarding bifurcation of claims into a secured part and an unsecured part, the claim amounts listed on a proof of claim control this Plan over any contrary amounts listed below.							
(a) <u>Bifurcated claims - secured parts</u> : Debtor proposes that, for the purposes of distributions under this Plan, the dollar amount of secured claims in this Class 3B should be as set forth in the column headed "Secured Claim Amount." For that dollar amount to be binding on the affected parties, either							
	 (i) Debtor must obtain a court order granting a motion fixing the dollar amount of the secured claim and/or avoiding the lien, or 						
(ii) Debtor must complete and comply with Part 2 Section IV.C., so that the Plan itself serves as such a motion; the "Included" boxes must be checked in Part 1 Paragraphs 1.1 and/or 1.2 (indicating that this Plan includes valuation and lien avoidance, and/or avoidance of a judicial lien or nonpossessory, nonpurchase-money lien in Section IV.C.); and this Plan must be confirmed - if any one of those conditions is not satisfied, then the claim will not be bifurcated into a secured part and an unsecured part pursuant to this sub-paragraph.							
(t	(b) <u>Bifurcated claims - unsecured parts</u> : Any allowed claim that exceeds the amount of the secured claim will be treated as a nonpriority unsecured claim in Class 5 below.						
NAME OF	CREDITOR	LAST 4 DIGITS OF ACCOUNT NUMBER	CLAIM TOTAL	SECURED CLAIM AMOUNT	INTEREST RATE	ESTIMATED MONTHLY PAYMENT	ESTIMATED TOTAL PAYMENTS

See attachment for additional claims in Class 3B.

claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below.	IN FULL DURING Check all that apply. None. If "None" is cl					
IN FULL DURING THE TERM OF THIS PLAN (WITHOUT BIFURCATION), INCLUDING CURE OF ARREARS, IF APPLICABLE. Check all that apply. None. If "None" is checked, the rest of this form for Class 3C need not be completed. Debtor proposes to treat the claims listed below as fully secured claims on the terms set forth below. The claims will not be bifurcated. The claim amounts listed on a proof of claim control this Plan over any contra amounts listed below. IMPAIRED CLAIMS PAID THROUGH THE PLAN BY THE TRUSTEE NAME OF CREDITOR LAST 4 DIGITS OF ACCOUNT NUMBER CLAIM TOTAL INTEREST CLAIM TOTAL RATE BAYMENT CURE AND MAINTAIN CLAIMS Debtor will maintain and make the current contractual installment payments (Ongoing Payments) on the secure claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below.	IN FULL DURING Check all that apply. None. If "None" is cl					
None. If "None" is checked, the rest of this form for Class 3C need not be completed. Debtor proposes to treat the claims listed below as fully secured claims on the terms set forth below. They claims will not be bifurcated. The claim amounts listed on a proof of claim control this Plan over any contra amounts listed below. IMPAIRED CLAIMS PAID THROUGH THE PLAN BY THE TRUSTEE IMPAIRED CLAIMS PAID THROUGH THE PLAN BY THE TRUSTEE NAME OF CREDITOR LAST 4 DIGITS OF ACCOUNT NUMBER CLAIM TOTAL INTEREST RATE ESTIMATED MONTHLY PAYMENT ESTIMATED TOTAL PAYMENTS CURE AND MAINTAIN CLAIMS CURE AND MAINTAIN CLAIMS Claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below.	None. If "None" is c					
Debtor proposes to treat the claims listed below as fully secured claims on the terms set forth below. They claims will not be bifurcated. The claim amounts listed on a proof of claim control this Plan over any contrat amounts listed below. IMPAIRED CLAIMS PAID THROUGH THE PLAN BY THE TRUSTEE NAME OF CREDITOR LAST 4 DIGITS OF ACCOUNT NUMBER CLAIM TOTAL INTEREST RATE ESTIMATED ACCOUNT NUMBER CLAIM TOTAL ESTIMATED ACCOUNT NUMBER CLAIM TOTAL INTEREST CURE AND MAINTAIN CLAIMS Debtor will maintain and make the current contractual installment payments (Ongoing Payments) on the secure claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below.						
claims will not be bifurcated. The claim amounts listed on a proof of claim control this Plan over any contrata amounts listed below. IMPAIRED CLAIMS PAID THROUGH THE PLAN BY THE TRUSTEE NAME OF CREDITOR LAST 4 DIGITS OF ACCOUNT NUMBER CLAIM TOTAL INTEREST RATE ESTIMATED MONTHLY PAYMENT ESTIMATED TOTAL PAYMENTS CURE AND MAINTAIN CLAIMS Debtor will maintain and make the current contractual installment payments (Ongoing Payments) on the secure claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below.	Debtor proposes to					
NAME OF CREDITOR LAST 4 DIGITS OF ACCOUNT NUMBER CLAIM TOTAL INTEREST RATE ESTIMATED MONTHLY PAYMENT ESTIMATED TOTAL PAYMENTS CURE AND MAINTAIN CLAIMS CURE AND MAINTAIN CLAIMS CURE AND MAINTAIN CLAIMS Debtor will maintain and make the current contractual installment payments (Ongoing Payments) on the secure claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below.						
NAME OF CREDITOR DIGITS OF ACCOUNT NUMBER CLAIM TOTAL INTEREST RATE ESTIMATED MONTHLY PAYMENT ESTIMATED TOTAL PAYMENTS CLAIM TOTAL UNDER UNTEREST RATE ESTIMATED MONTHLY PAYMENT ESTIMATED TOTAL PAYMENTS CLAIM TOTAL UNTEREST RATE ESTIMATED MONTHLY PAYMENT ESTIMATED TOTAL PAYMENTS Debtor will maintain and make the current contractual installment payments (Ongoing Payments) on the secure claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below.	IM					
 Debtor will maintain and make the current contractual installment payments (Ongoing Payments) on the secure claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below. 	NAME OF CREDITOR					
 Debtor will maintain and make the current contractual installment payments (Ongoing Payments) on the secure claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below. 						
claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below.	CURE AND MAINTAIN CLAIMS					
Chapter 13 Trustee, with interest, if any, at the rate stated. The dollar amount of arrearage stated on a proof of claim controls over any contrary amount listed below.	claims listed below pursuant to the terms of the applicable contract, except as stated otherwise in this Plan. These payments will be disbursed either by the Chapter 13 Trustee or directly by Debtor, as specified below. Debtor will cure and pay the prepetition arrearages, if any, on a claim listed below through disbursements by the Chapter 13 Trustee, with interest, if any, at the rate stated. The dollar amount of arrearage stated on a proof of					
Cure of Default						
NAME OF CREDITORLAST 4 DIGITS OF ACCOUNT NUMBERAMOUNT OF ARREARAGE, IF ANYINTEREST RATEESTIMATED MONTHLY PAYMENT ON ARREARAGEESTIMATED PAYMENT DISBURSIN AGENT	NAME OF CREDITOR					
Trustee						

See attachment for additional claims in Class 3C.

CLASS 3D							
SECURED CLAIMS EXCLUDED FROM 11 U.S.C. §506							
Check one.							
None. If "None" is checked, the rest of this form for Class 3D need not be completed.							
The claims listed below were ei	The claims listed below were either:						
 Incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of Debtor, or 							
2. Incurred within 1 year of the petition date and secured by a purchase money security interest in any other thing of value.							
These claims will be paid in full under this Plan with interest at the rate stated below. The claim amount stated on a proof of claim controls over any contrary amount listed below.					ount stated on a		
NAME OF CREDITOR	LAST 4 DIGITS OF ACCOUNT NUMBER	CLAIM TOTAL	INTEREST RATE	ESTIMATED MONTHLY PAYMENT	ESTIMATED TOTAL PAYMENTS		

See attachment for additional claims in Class 3D.

		CLA	SS 4			
AFT	ER THE DATE	WHICH THE LAST PAYMENT ON A CLAIM IS DUE ON WHICH THE FINAL PLAN PAYMENT IS DUE, ROVIDED FOR UNDER 11 U.S.C. §1322(b)(5)				
Check one.						
None. If "None" is che	cked, the rest	of this form for Cl	ass 4 need no	ot be completed.		
Debtor will maintain an claims listed below pur payments will be disbu cure and pay the prepe Trustee, with interest, i over any contrary amou	suant to the te rsed either by etition arrearao f any, at the ra	erms of the applic the Chapter 13 T ges, if any, on a c ate stated. The do	able contract, rustee or dire claim listed be	, except as stated ectly by Debtor, a elow through disb	l otherwise in th s specified belo oursements by t	is Plan. These w. Debtor will he Chapter 13
	LAST 4			Cure of Default		
NAME OF CREDITOR	DIGITS OF ACCOUNT NUMBER	AMOUNT OF ARREARAGE, IF ANY	INTEREST RATE	ESTIMATED MONTHLY PAYMENT ON ARREARAGE	ESTIMATED TOTAL PAYMENTS	ONGOING PAYMENT DISBURSING AGENT
						Trustee Tobbor
						Trustee Debtor
						☐ Trustee ☐ Debtor

See attachment for additional claims in Class 4.

CLASS 5A

NON-PRIORITY UNSECURED CLAIMS NOT SEPARATELY CLASSIFIED

Allowed nonpriority unsecured claims not separately classified must be paid pursuant to Section I.B. above.

SEPARATE CLASSIFICATION:

Check all that apply if Debtor proposes any separate classification of nonpriority unsecured claims.

None. If "None" is checked, the rest of this form for Class 5 need not be completed.

	CLASS 5B			
Maintenance of payments. Debtor will maintain claims listed below on which the last payment is d payments will be disbursed by Debtor.				
NAME OF CREDITOR	LAST 4 DIGITS OF ACCOUNT NUMBER	INTEREST RATE	ESTIMATED MONTHLY PAYMENT	ESTIMATED TOTAL PAYMENTS

CLASS 50	;					
Other separately classified nonpriority unsecured claims.						
LAST 4 DIGITS OF ACCOUNT NUMBER	AMOUNT TO BE PAID ON THE CLAIM	INTEREST RATE	ESTIMATED TOTAL AMOUNT OF PAYMENTS			
	cured claims. LAST 4 DIGITS OF ACCOUNT	LAST 4 DIGITS OF ACCOUNT	Cured claims. LAST 4 DIGITS OF ACCOUNT CLAIM			

See attachment for additional claims in Class 5.

	CLASS 6
SUDDEND	DER OF COLLATERAL
Check one.	JER OF COLLATERAL
None. If "None" is checked, the rest of this form	for Class 6 need not be completed.
requests that upon confirmation of the Plan the st	ed below the collateral that secures the creditor's claim. Debtor tay under 11 U.S.C. § 362(a) be terminated as to the collateral only ninated in all respects. Any allowed unsecured claim resulting from Class 5 above.
Creditor Name:	Description:
See attachment for additional claims in Class 6.	I

	CL	ASS 7
	EXECUTORY CONTRACT	S AND UNEXPIRED LEASES
Any executory contracts	or unexpired leases not listed below	v are deemed rejected.
Check one.		
None. If "None"	is checked, the rest of this form for	Class 7 need not be completed.
	ontracts and unexpired leases listed of the other party(ies) to the contra	d below are treated as specified (<i>identify the contract or ct or lease</i>):
Creditor Name:		
Description:		
[Rejected	Assumed; cure amount (if any): \$, to be paid over months
Creditor Name:		
Description:		
[Rejected	Assumed; cure amount (if any): \$, to be paid over months
	ed within months of filing ursements by the Chapter 13 Tru	of the bankruptcy petition. All cure payments will be stee.
See attachment for	additional claims in Class 7.	

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

Section III. PLAN SUMMARY

CLASS 1a	
CLASS 1b	
CLASS 1c	
CLASS 2	
CLASS 3B	
CLASS 3C	
CLASS 3D	
CLASS 4	
CLASS 5A	
CLASS 5C	
CLASS 7	
SUB-TOTAL	
CHAPTER 13 TRUSTEE'S FEE (Estimated 11% unless advised otherwise)	
TOTAL PAYMENT	

Section IV. NON-STANDARD PLAN PROVISIONS

None. If "None" is checked, the rest of Section IV need not be completed.

Pursuant to FRBP 3015(c), Debtor must set forth all nonstandard Plan provisions in this Plan in this separate Section IV of this Plan and must check off the "Included" box or boxes in Paragraphs 1.1, 1.2, 1.3 and/or 1.4 of Part 1 of this Plan. Any nonstandard Plan provision that does not comply with these requirements is <u>ineffective</u>. A nonstandard Plan provision means any Plan provision not otherwise included in this mandatory Chapter 13 Plan form, or any Plan provision deviating from this form.

The nonstandard Plan provisions seeking modification of liens and security interests address only those liens and security interests known to Debtor, and known to be subject to avoidance, and all rights are reserved as to any matters not currently known to Debtor.

- A. Debtor's Intent to File Separate Motion to Value Property Subject to Creditor's Lien or Avoid Creditor's Lien [11 U.S.C. § 506(a) and (d)]. Debtor will file motion(s) to value real or personal property of the bankruptcy estate and/or to avoid a lien pursuant to 11 U.S.C § 506(a) and (d), as specified in **Attachment A**.
- B. Debtor's Intent to File Separate Motion to Avoid Creditor's Judicial Lien or Nonpossessory, Nonpurchase Security Interest [11 U.S.C. § 522(f)]. Debtor will file a Motion to avoid a judicial lien or nonpossessory, nonpurchase-money security interest, on real or personal property of the bankruptcy estate listed below pursuant to 11 U.S.C § 522(f). If the court enters an order avoiding a lien under 11 U.S.C. § 522(f), the Chapter 13 Trustee will not pay any claim filed based on that lien as a secured claim.

Name of Creditor Lienholder/Servicer:

Description of lien and collateral (e.g., 2nd lien on 123 Main St.):

Name of Creditor Lienholder/Servicer: _____

Description of lien and collateral (e.g., 2nd lien on 123 Main St.):

See attachment for any additional liens and security interests to be avoided by separate 11 U.S.C. § 522(f) motion.

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

C. Debtor's Request in this Plan to Modify Creditor's Secured Claim and Lien. Debtor proposes to modify the following secured claims and liens in this Plan without a separate motion or adversary proceeding - this Plan will serve as the motion to value the collateral and/or avoid the liens as proposed below. To use this option, Debtor must serve this Plan, LBR Form F 3015-1.02.NOTICE.341.LIEN.CONFRM and all related exhibits as instructed in that form. Note: Not all Judges will grant motions to value and/or avoid liens through this Plan. Please consult the specific Judge's Instructions/Procedures on the court's website for more information.

	DEBTOR'S REQUEST TO MODIFY CREDITOR'S SECURED CLAIM AND LIEN EDITOR LIENHOLDER/SERVICER
	Real property collateral (street address and/or legal description or document recording number, including county of recording):
	(attach page with legal description of property or document recording number as appropriate).
	Other collateral (add description such as judgment date, date and place of lien recording, book and page number):
	11 U.S.C. § 522(f) – Debtor seeks avoidance of your lien(s) on the above described collate effective immediately upon issuance of the order confirming this Plan.
	11 U.S.C. § 506(a) and (d) – Debtor seeks avoidance of your lien(s) on the above described collate that will be effective upon the earliest to occur of either payment of the underlying debt determinuder nonbankruptcy law or one of the following:
(ch	eck all that apply and see LBR Form F 4003-2.4.ORDER.AFTERDISCH):
	(1) discharge under 11 U.S.C. § 1328, or
	(2) Upon completion of all Plan payments.
	f collateral:\$\$ ducing equity (to which subject lien can attach): \$ + \$ + \$ = \$
Exempt	ψ φ φ φ ion (only applicable for lien avoidance under 11 U.S.C. § 522(f)):(\$
and/or <u>Attachr</u> Attachr	ore, Debtor requests that this court issue an order granting the foregoing property valuat lien avoidance of the above-listed creditor on the above-described collateral in the for <u>nent B, C and/or D</u> to this Plan, as applicable. (<i>Debtor must use and attach a separ</i> <i>ment B, C and/or D which are also mandatory court forms for modification of each secu</i> <i>nd lien.</i>)
Amount	of remaining secured claim (negative results should be listed as \$-0-):\$
Note: S	ee other parts of this Plan for the proposed treatment of any remaining secured claim (gener

See attachment(s) for additional request(s) to modify secured claims and liens by this Plan.

D. Other Non-Standard Plan Provisions (use attachment, if necessary):

V. REVESTING OF PROPERTY

Property of the bankruptcy estate will not revest in Debtor until a discharge is granted or the case is dismissed or closed without discharge. Revesting will be subject to all liens and encumbrances in existence when the case was filed, except those liens avoided by court order or extinguished by operation of law. In the event the case is converted to a case under Chapter 7, 11, or 12 of the Bankruptcy Code, the property of the estate will vest in accordance with applicable law. After confirmation of this Plan, the Chapter 13 Trustee will not have any further authority or fiduciary duty regarding use, sale, or refinance of property of the estate except to respond to any motion for proposed use, sale, or refinance as required by the LBRs. Prior to any discharge or dismissal, Debtor must seek approval of the court to purchase, sell, or refinance real property.

By filing this document, the Attorney for Debtor, or Debtor if not represented by an attorney, also certify(ies) that the wording and order of the provisions in this Plan are identical to those contained in the Central District of California Chapter 13 Plan other than any nonstandard Plan provisions included in Section IV.

Date: _____

Attorney for Debtor

Debtor 1

Debtor 2

ATTACHMENT A to Chapter 13 Plan/Confirmation Order (11 U.S.C. §§ 506: valuation/lien avoidance by separate motion(s))

None. If "None" is checked, the rest of this Attachment A need not be completed.

	litor Lienholder/Servicer:
Crec	litor Lienholder/Servicer:
	Subject Lien (e.g., 3 rd Lien on 123 Main St.):
Crec	litor Lienholder/Servicer:
	litor Lienholder/Servicer:
Crec	litor Lienholder/Servicer:
	Subject Lien (e.g., 2 nd Lien on 456 Broadway):
Crec	litor Lienholder/Servicer:
	Subject Lien (e.g., 3rd Lien on 456 Broadway):
Crec	litor Lienholder/Servicer:
	Subject Lien (e.g., 4th Lien on 456 Broadway):
Crec	litor Lienholder/Servicer:
	litor Lienholder/Servicer:
Crec	litor Lienholder/Servicer:
	Subject Lien (e.g., 3 rd Lien on 789 Crest Ave.):
Crec	litor Lienholder/Servicer:
	Subject Lien (e.g., 4th Lien on 789 Crest Ave.):

(Attach additional pages for more liens/provisions.)

CERTIFICATION: I have prepared this attachment (including any additional pages) for use by the Chapter 13 Trustee. I certify under penalty of perjury under the laws of the United States of America that the information provided in this attachment is accurate to the best of my knowledge after reasonable inquiry, and I acknowledge that the Chapter 13 Trustee has no duty to verify the accuracy of that information.

Executed on (date) _____

Printed Name ______ Signature: ______

Attorney for Debtor or Debtor appearing without attorney

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

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)			

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 Paym	ent of Eviction Judgment
I certify under penalty of perjury that (Check all that apply	<i>η</i> :
Under the state or other nonbankruptcy law that applies judgment), I have the right to stay in my residence by p	
Within 30 days after I filed my Voluntary Petition for Ind Form 101), I have paid my landlord the entire amount I (eviction judgment).	
Signature of Debtor 1	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 (<u>www.uscourts.gov/rulesandpolicies/rules.aspx</u>) and the court's local website (go to <u>http://www.uscourts.gov/Court_Locator.aspx</u> to find your court's website) for any specific requirements that you might have to meet to serve this statement.

UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA		
In re:		CASE NUMBER:
	Debtor(s).	DEBTOR'S REQUEST TO <u>ACTIVATE</u> ELECTRONIC NOTICING (DeBN)

Debtor Electronic Bankruptcy Noticing (DeBN) is a voluntary program that enables a debtor to receive by email the orders and court-generated notices normally sent by U.S. mail to a mailing address. A debtor must complete and file this form with the court to activate a DeBN account. Joint debtors must each complete and file a separate form.

ACTIVATION REQUEST

Pursuant to Federal Rule of Bankruptcy Procedure 9036, I request that the court deliver orders and court-generated
notices to my email address rather than by U.S. mail to my mailing address.

DEBTOR'S NAME AND EMAIL ADDRESS

My name is:
My email address is: (CAPITAL letters only)
Confirm email address: (CAPITAL letters only)
Select one:
I am the Debtor in this bankruptcy case.
The Debtor in this bankruptcy case is a corporation, partnership, or other legal entity, and I am the authorized representative.
DEBTOR'S SIGNATURE
 I understand that my request is limited to the email delivery of only orders and court-generated notices that are filed by the U.S. Bankruptcy Court. Documents filed by a bankruptcy trustee, creditors, and other parties that require service upon me must continue to be served by U.S. mail or in person as required by court rules.
 I understand that by requesting email notification, the court may establish my DeBN account and deliver to me, by email, documents filed by the court in any current or future case from any bankruptcy court in which I am listed with the same name and mailing address, including cases in which I am a creditor, plaintiff or defendant.
 I understand that I will be assigned a DeBN account number and my DeBN account will be activated after I complete, sign, and file this "Debtor's Request to Activate Electronic Noticing (DeBN)" form.
4. I understand that emails sent by the court's noticing center may arrive in my email spam folder and I should regularly check it for electronic delivery of my orders and court-generated notices. I understand further that my DeBN account will be deactivated by the court if an email is returned undelivered or "bounces back," and the court will instead serve orders and court-generated notices delivered by U.S. mail to my mailing address.
I have read and understand the requirements set forth above and I agree to the terms and conditions of the Debtor Electronic Bankruptcy Noticing (DeBN) program. I request delivery of orders and court-generated notices to my email address indicated above rather than to my mailing address.

Date:

Signature: