

Chapter 13 Plan Summary

Case No.: _____

Debtor(s): _____ SS#: _____ Net Monthly Earnings: _____

_____ SS#: _____ Number of Dependents: _____

Full Address: _____

I. Plan Payments:

(___) Debtor(s) propose to pay direct a total of \$ _____ weekly biweekly semi-monthly monthly into the plan; or

(___) Payroll deduction Order: To _____ for
\$ _____ weekly biweekly semi-monthly monthly.

Length of plan is approximately _____ months, and the total amount of debt to be disbursed by the Trustee is approximately \$ _____.

II. From the payments received, the trustee shall make disbursements as follows:

A. PRIORITY payments described in 11 U.S.C. §507 in full deferred cash payments;

B. Total ATTORNEY FEE: \$ _____, to be paid \$ _____ upon confirmation and \$ _____ per month for _____ months; and

C. The holder of each SECURED claim shall retain the lien securing such claim until a discharge is granted and such claim shall be paid in full with interest in deferred cash payments as follows:

1. Long Term Debts:

Name of Creditor	Total Amount of Debt	Amount of regular payment to be paid <input type="checkbox"/> by Trustee <input type="checkbox"/> by Debtor	Regular Payments to begin: Month/Year	Arrears to be paid by Trustee	Months included in arrearage amount	Proposed Interest Rate on Arrearage	Proposed Fixed Payment on Arrearage

2. Secured Debts (not long term debts) to be paid through Trustee:

Name of Creditor	Total Amount of Debt (Payoff Balance)	Debtor's Value	Unsecured Portion	Description of Collateral	Proposed Interest Rate	Proposed fixed Payments

III. Other debts not shown in 1. or 2. above which Debtor(s) propose to pay direct:

Name of Creditor	Total Amount of Debt	Amount of Regular Payment	Description of Collateral, Property or Debt	Reason for Direct Payment

IV. Special Provisions:

- This is an original plan. This is an amended plan replacing plan dated _____.
- This plan proposes to pay unsecured creditors _____%.
- Debtor assumes/rejects (circle one) lease and/or executory contract with _____.
- Other provisions: _____

Attorney for Debtor Name/Address/ Telephone # _____

Dated: _____

Signature of Debtor

Telephone # _____

Signature of Debtor