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| Attorney or Party Name, Address, Phone No.:                  | For court use only      |
| <b>UNITED STATES BANKRUPTCY COURT<br/>DISTRICT OF HAWAII</b> | Case No.:<br>Chapter 13 |
| Debtor:<br>and, if any,<br>Joint Debtor:                     |                         |

**CERTIFICATE OF SERVICE RE: NOTICE OF DEBTOR’S OBJECTION TO CLAIM NO.**

The undersigned certifies that a copy of the Notice of Debtor’s Objection to Claim was served on the following:

Claimant & Claimant’s Attorney:

Howard M.S. Hu, Trustee  
1132 Bishop Street, Suite 301  
Honolulu, Hawaii 96813

Service was made on: \_\_\_\_\_ by First class mail or  
Other (describe): \_\_\_\_\_

Dated: \_\_\_\_\_  
Person certifying service: \_\_\_\_\_