

**SIXTH CIRCUIT BANKRUPTCY APPELLATE PANEL
BANKRUPTCY APPEAL CONFERENCE STATEMENT**

BAP NO:	CASE MANAGER:																																				
CASE NAME:	DISTRICT: JUDGE:																																				
<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%; text-align:left;">ATTORNEY(S)</th> <th style="width:25%;">NAME</th> <th style="width:35%;">ADDRESS</th> <th style="width:25%;">TELEPHONE</th> </tr> </thead> <tbody> <tr> <td colspan="4" style="padding-left: 5px;">Appellant:</td> </tr> <tr> <td></td> <td colspan="3" style="padding-left: 20px;"><input type="checkbox"/> Plaintiff</td> </tr> <tr> <td></td> <td colspan="3" style="padding-left: 20px;"><input type="checkbox"/> Defendant</td> </tr> <tr> <td></td> <td colspan="3" style="padding-left: 20px;"><input type="checkbox"/> Other (Specify)</td> </tr> <tr> <td colspan="4" style="padding-left: 5px;">Appellee:</td> </tr> <tr> <td></td> <td colspan="3" style="padding-left: 20px;"><input type="checkbox"/> Plaintiff</td> </tr> <tr> <td></td> <td colspan="3" style="padding-left: 20px;"><input type="checkbox"/> Defendant</td> </tr> <tr> <td></td> <td colspan="3" style="padding-left: 20px;"><input type="checkbox"/> Other (Specify)</td> </tr> </tbody> </table>		ATTORNEY(S)	NAME	ADDRESS	TELEPHONE	Appellant:					<input type="checkbox"/> Plaintiff				<input type="checkbox"/> Defendant				<input type="checkbox"/> Other (Specify)			Appellee:					<input type="checkbox"/> Plaintiff				<input type="checkbox"/> Defendant				<input type="checkbox"/> Other (Specify)		
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<p align="center">BANKRUPTCY COURT DISPOSITION</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:40%;"><u>Type of Judgment/Order Appealed</u></th> <th style="width:20%;"><u>Relief</u></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> DISMISSAL ON PLEADINGS</td> <td rowspan="2">SOUGHT:</td> </tr> <tr> <td><input type="checkbox"/> SUMMARY JUDGMENT</td> </tr> <tr> <td><input type="checkbox"/> JUDGMENT/BENCH DECISION</td> <td rowspan="4">GRANTED:</td> </tr> <tr> <td><input type="checkbox"/> JUDGMENT/JURY VERDICT</td> </tr> <tr> <td><input type="checkbox"/> JUDGMENT/MATTER OF LAW</td> </tr> <tr> <td><input type="checkbox"/> INJUNCTION</td> </tr> <tr> <td><input type="checkbox"/> OTHER _____</td> <td></td> </tr> </tbody> </table>	<u>Type of Judgment/Order Appealed</u>	<u>Relief</u>	<input type="checkbox"/> DISMISSAL ON PLEADINGS	SOUGHT:	<input type="checkbox"/> SUMMARY JUDGMENT	<input type="checkbox"/> JUDGMENT/BENCH DECISION	GRANTED:	<input type="checkbox"/> JUDGMENT/JURY VERDICT	<input type="checkbox"/> JUDGMENT/MATTER OF LAW	<input type="checkbox"/> INJUNCTION	<input type="checkbox"/> OTHER _____		<p>Is this case a cross appeal? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has this case or a related one been before the BAP previously? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, state:</p> <p>Case Name: _____</p> <p>Citation: _____</p> <p>Was this case mediated through the conference program? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																								
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<p>BASED ON YOUR PRESENT KNOWLEDGE</p> <p>1) <i>Will the determination of this appeal turn on the interpretation or application of a particular case or statute?</i></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If yes, provide:</i></p> <p>Case Name/Statute _____ Citation: _____</p>																																					
<p>Issue(s) proposed to be raised on appeal, including jurisdictional challenges:</p> 																																					

Please submit original and two (2) copies.

This is to certify that a copy of this pre-conference statement was served on opposing counsel of record this _____ day of _____, 200_____.

Signature of Counsel