

Local Bankruptcy Forms of the United States Bankruptcy Court



for the Western District of Pennsylvania

**Adopted January 27, 2012
Effective March 1, 2012**

The Honorable Thomas P. Agresti, Chief Judge

The Honorable Judith K. Fitzgerald

The Honorable Jeffery A. Deller

The Honorable Carlota M. Böhm

The Honorable Bernard Markovitz

John J. Horner, Clerk

**LOCAL BANKRUPTCY FORMS OF THE
U.S. BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA**

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IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re: : Bankruptcy No.
Debtor :

DECLARATION RE: ELECTRONIC FILING OF PETITION, SCHEDULES & STATEMENTS

PART I - DECLARATION OF PETITIONER

I, _____, and I, _____, the undersigned debtor, certify that the information I give to my attorney for the preparation of the petition, statements, schedules and mailing matrix is true and correct. I consent to my attorney sending my petition, this declaration, statements and schedules to the United States Bankruptcy Court. I understand that this DECLARATION RE: ELECTRONIC FILING is to be submitted to the Clerk once all schedules have been electronically docketed but, in any event, no later than 14 days following the date the petition was electronically filed unless the time is extended by order of court. I understand that failure to timely submit the signed original of this DECLARATION will result in dismissal of my case pursuant to 11 U.S.C. § 707(a)(3) without further notice.

[] [If petitioner is an individual] I declare under penalty of perjury that the information provided in this petition and the Social Security number(s) listed below are true and correct:

Name of Debtor Debtor has a Social Security number and it is: _____
Check here if Debtor does not have a Social Security number: _____

Name of Joint Debtor Joint Debtor has a Social Security number and it is: _____
Check here if Joint Debtor does not have a Social Security number: _____

[] [If petitioner is a corporation or partnership] I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in this petition.

Dated: _____ Signed: _____
(Type Debtor name here) (Joint Debtor, if applicable, type name)

Title: _____
(Corporate or Partnership Filing)

Phone Number of Signer Address of Signer

PART II - DECLARATION OF ATTORNEY

I further declare that before filing any document I will have examined the debtor's petition and that the information is complete and correct to the best of my knowledge, information and belief. The debtor will have signed this form before I submit the petition, schedules, statements and mailing matrix. I will give the debtor a copy of all forms and information to be filed with the United States Bankruptcy Court, and have followed all other requirements for electronic case filing. I further declare that I have examined the above debtor's petition, schedules, and statements and, to the best of my knowledge, information and belief, they are true, correct, and complete. If debtor is an individual, I further declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of Title 11, United States Code, and have explained the relief available under each such chapter. This declaration is based on all information of which I have knowledge.

[] Check box if debtor is a servicemember as defined by the Servicemembers Civil Relief Act of 2003. If debtor becomes entitled to protections of the Act during the bankruptcy case, he shall file an affidavit advising the Court within fourteen (14) days of the date of his change in status.

Dated: _____

Attorney for Debtor (Signature)

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	Chapter 11
	:	
Movant	:	Related to Document No.
	:	
v.	:	
	:	Hearing Date and Time:
Respondent (if none, then "No Respondent")	:	

**EX PARTE MOTION FOR DESIGNATION
AS COMPLEX CHAPTER 11 BANKRUPTCY CASE**

This bankruptcy case was filed on _____. The undersigned party in interest believes that this case qualifies as a Complex Chapter 11 Bankruptcy Case pursuant to Local Bankruptcy Rules because:

_____ There is a need for expedited consideration of the following "First Day" motions.

_____ The debtor has total debt of more than \$_____ million and unsecured non-priority debt of more than \$_____ million.

_____ There are more than _____ parties in interest in this case.

_____ Claims against the debtor are publicly traded.

_____ Equity interests in the debtor are publicly traded.

_____ Other: (Substantial explanation is required. Attach additional sheets if necessary.)

DATE: _____

By: _____
Signature

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re: : Bankruptcy No.
:
Debtor(s) :
: Chapter 11

INITIAL ORDER FOR COMPLEX CHAPTER 11 BANKRUPTCY CASE

This bankruptcy case was filed on _____. An Ex Parte Motion for Designation as a Complex Chapter 11 Case was filed. After review of the initial pleadings filed in this case, the Court concludes that this is a Complex Chapter 11 Case and issues this scheduling order.

1. The Debtor shall maintain a Service List identifying the parties that must be served whenever a motion or other pleading requires notice. Upon establishment of such a list, notices of motions and other matters will be limited to the parties on the Service List.
 - a. The Service List shall initially include the Debtor, Debtor’s counsel, counsel for the unsecured creditors’ committee, U.S. Trustee, all secured creditors, the 20 largest unsecured creditors, any indenture trustee, and any party that files a request for notice.
 - b. Any party in interest that wishes to receive notice, other than as listed on the Service List, shall be added to the Service List merely by request filed of record with the Clerk and served on the Debtor and Debtor’s counsel.
 - c. Parties on the Service List are encouraged to give a fax number or e-mail address for service of process, and parties are encouraged to authorize service by fax or e-mail. Consent to fax or e-mail service may be included in the party’s notice of appearance and request for service.
 - d. The Service List shall be filed within three (3) calendar days after entry of this Order. Debtors shall update the Service List and file with the Clerk a copy of the updated Service List upon request of a party to be added.

2. The Court hereby establishes the following dates and times for hearing all motions and other matters in this case in Courtroom _____ at _____.

3. If a matter is properly noticed for hearing and the parties reach agreement on a settlement of the dispute prior to the hearing, the parties may announce the settlement at the scheduled hearing. If the Court determines that the notice of the dispute and the hearing is adequate notice of the effects of the settlement, the Court may approve the settlement at the hearing without further notice of the terms of the settlement.

4. The debtor shall give notice of this Order to all parties in interest within seven (7) calendar days. If any party in interest objects to the provisions of this Order, that party shall file and serve a motion for reconsideration and proposed order within fourteen (14) days of the date of this Order articulating the objection and the relief requested.

Date: _____

United States Bankruptcy Judge

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

REGISTRATION FORM TO FILE ELECTRONICALLY

Applicant Information:

First/Middle/Last Name: _____

Bar Registration Number: _____

State of Registration: _____

Firm Name: _____

Address: _____

Phone Number: _____

E-Mail Address: _____

Year Admitted to the Bar of the United States District Court for the Western District of Pennsylvania: _____, or Case Number where admitted Pro Hac Vice: _____.

By submitting this registration form, the undersigned agrees that:

1. The provisions of the Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the Local Bankruptcy Rules shall be followed when filing documents electronically.
2. A registered attorney is responsible documents submitted electronically by means of the attorney's login and password.
3. A registered attorney's system eligibility may be restricted or revoked by the Court.
4. A registered attorney is required to keep all contact and email information in their CM/ECF account current and up to date.

I hereby certify that:

- I have attended the CM/ECF training provided by the Clerk and attest to having entered, or having overseen the entry of, all the data in the CM/ECF test submitted to the Clerk; or
- I have electronically filed documents and have a valid login and password for the
 - United States Bankruptcy Court or United States District Court (check a box) in the _____ (name of district).

The undersigned requests a login and password to the Court's CM/ECF system in order to file documents electronically.

Date

Attorney Signature

Please return completed form to:
Clerk's Office, U.S. Bankruptcy Court, Attn: CM/ECF Registration, 5414 U.S. Steel Tower, 600 Grant Street, Pittsburgh, PA 15219

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

**LIMITED FILING USER
REGISTRATION FORM AND AGREEMENT**

The undersigned hereby requests an account with the Court’s Case Management /Electronic Case Filing System (“CM/ECF”) for the limited purpose of filing proofs of claim, notice requests, withdrawal of claims, transfers of claims, objections to transfer of claim, Reaffirmation Agreements, Notices of Mortgage Payment Change, and Notices of Post-Petition Fees, Expenses and Charges. “Firm” is the name of the Limited Filing User entity on whose behalf an employee or agent (“Limited Filing User”) is to be issued a login and password and authorized to file the type of documents listed above.

Firm Name: _____

The undersigned certifies under penalty of perjury that he or she is properly authorized to submit this Limited Filing User Registration Form on behalf of the Firm identified above and that the Firm agrees to adhere to the terms and conditions specified on this form. The Firm requests that the Limited Filing User be provided with a login and password for the limited purpose of filing proofs of claim, notice requests, withdrawal of claims, transfers of claims, objections to transfer of claim, Reaffirmation Agreements, Notices of Mortgage Payment Change, and Notices of Post-Petition Fees, Expenses and Charges.

Dated: _____

Signature:

Mailing Address

Print Name

Mailing Address

Internet E-Mail Address

Mailing Address

Phone Number

The undersigned Limited Filing User agrees to adhere to the terms and conditions specified on this form.

Dated: _____

Signature:

Mailing Address

Print Name

Mailing Address

Internet E-Mail Address

Mailing Address

Phone Number

The following two parties will serve as alternate contacts in the event that the Limited Filing User is not available:

_____	_____
Print Name	Mailing Address
_____	_____
Internet E-Mail Address	Mailing Address
_____	_____
Phone Number	Mailing Address
_____	_____
Print Name	Mailing Address
_____	_____
Internet E-Mail Address	Mailing Address
_____	_____
Phone Number	Mailing Address

Limited Filing User certifies that he meets one of the following conditions in order to qualify for an account on CM/ECF:

I am presently a CM/ECF participant in another United States Bankruptcy Court, with either full CM/ECF privileges or limited use privileges to file proofs of claim, notice requests, withdrawal of claims, transfers of claims, objections to transfer of claim, Reaffirmation Agreements, Notices of Mortgage Payment Change, and/or Notices of Post-Petition Fees, Expenses and Charges.

Please indicate other bankruptcy court(s):

I have completed the training class provided by the Clerk's Office of the United States Bankruptcy Court in the Western District of Pennsylvania.

By submitting this registration form, the Firm and Limited Filing User:

(1) agree to follow the local rules and orders promulgated by the United States Bankruptcy Court for the Western District of Pennsylvania;

(2) acknowledge that the use of the CM/ECF login and password constitutes the signature of Firm. The name of the Limited Filing User must be typed on the signature line if the Limited Filing User is the signatory. When the Limited Filing User signs the document, the name of the Limited User under whose log-in and password the document is submitted must be preceded by an "/s/" and typed in the space where the signature would otherwise appear on a document. The Limited Filing User must comply with the signature requirements of W.PA.LBR. 5005-6.

(3) acknowledge that use of the password and login to file is certification by the Limited Filing User that: (A) the Limited Filing User is authorized to file the document(s) on behalf of the Firm; (B) the Firm is the same entity stated on the Limited Filing User's application to use CM/ECF; and (C) the Firm has the authority to file documents as an agent when filing documents on behalf of an entity other than the Firm.

(4) acknowledge that Limited Filing Users must add the correct mailing address to the creditor matrix if the current address is incorrect. (A Limited Filing User cannot edit an existing creditor address in the CM/ECF data base. A new creditor record with the correct address must be added to the creditor matrix.)

(5) certifies that the Limited Filing User and Firm's representative whose signature appears above have read the local rules concerning electronic filing issued by the Court.

(6) agree to notify the Clerk if Limited Filing User ceases to be an employee or agent of the Firm or is no longer authorized to file documents on the Firm's behalf.

(7) waive service of documents and docket activity electronically.

(8) agree that the Limited Filing User shall take the Clerk's training course prior to obtaining a login and password to CM/ECF if not a CM/ECF participant in another district.

(9) agree that the Clerk may terminate use of the login and password without prior notice when the Clerk deems such action necessary.

(10) agree to provide the name, phone number and e-mail address of two additional contacts at the Firm in the event that the Limited Filing User cannot be contacted.

(11) agree to submit an updated registration form when the name or address of the Limited Filing User or an additional contact changes.

Please submit to:

ATTN: CM/ECF Registration
United States Bankruptcy Court
5414 US Steel Tower
600 Grant Street
Pittsburgh, PA 15219

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

NOTICE OF TERMINATION OF CM/ECF PRIVILEGES

I, _____, the undersigned, hereby certify that I am not an attorney of record on any pending case before the Bankruptcy Court for the Western District of Pennsylvania (the "Court").

I am instructing the Clerk of Court to terminate my status as a registered Filing User in the Court's CM/ECF System, pursuant to W.PA.LBR 9010-2(b).

I understand that I will no longer be able to file documents electronically or receive Notices of Electronic Filing when entries are made on cases.

I shall mail this signed **Notice of Termination of CM/ECF Privileges** to the Clerk of Court by certified U.S. mail.

EXECUTED ON [date]:

By: _____

Signature

Typed Name

Address

Phone No.

Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re: : Bankruptcy No.
Debtor : Chapter 11
Movant : Related to Document No.
v. :
Respondent (if none, then "No Respondent") :

CHAPTER 13 BUSINESS CASE QUESTIONNAIRE

Local Bankruptcy Rule 1007-4 requires chapter 13 debtors that are self-employed (including debtors acting as landlords), to complete and submit this Questionnaire to the Trustee along with all documents set forth in the Checklist which follows the signature page of the Questionnaire. You must answer all items in the Questionnaire. Use a separate page if additional room is needed, but be sure to reference the additional page next to the item you are answering. All information must be complete and organized. Failure to provide detailed and accurate information may result in the Trustee filing a motion to dismiss your case.

- You must send this completed Questionnaire along with all required attachments to Ronda J. Winnecour, Trustee, U.S. Steel Tower, Suite 3250, 600 Grant Street, Pittsburgh, PA 15219 so that it reaches the Trustee at least fourteen (14) days prior to your first scheduled meeting of creditors. If you fail to do so, the Trustee may require your appearance at an additional meeting or file a motion to dismiss your case.
Do not file this Questionnaire with the Clerk of the Bankruptcy Court.
The Questionnaire must be dated.
The Questionnaire must contain the original signature of all debtors in the case.
A copy of the Questionnaire should be kept by the debtor for future reference.
If you have questions concerning this Questionnaire, please contact your attorney.

Debtor (s)' Name(s) _____

Chapter 13 Case No. _____

Name of Business _____

List all past names used by Business _____

Location where business is operated _____

Description of Business Activities/Type of Business _____

What circumstances led you to file this bankruptcy? _____

How do you expect these circumstances to change so that you will be able to fund a Chapter 13 Plan? _____

1. Type of Business Organization, circle one:

Corporation Sole Proprietorship Partnership Other

Has business ever been incorporated? _____ Yes _____ No

Date business began _____

Federal ID number (if applicable) _____ State ID number _____

2. If your business is a Partnership, please answer (a) to (c) below:

(a) Names of Partners _____

(b) Percentage of your ownership: Debtor _____ % Joint Debtor _____ %

(c) Is there a written partnership agreement? _____ Yes _____ No

If yes, please include a copy of the agreement with this Questionnaire when you return it to the Trustee.

3. If your business is a Corporation, please answer (a) to (g) below:

(a) Who are the shareholders? _____

(b) How many shares have been issued and are outstanding? _____

(c) What is your percentage ownership? Debtor _____ % Joint Debtor _____ %

(d) State of incorporation _____

(e) Is the corporation in good standing with the Secretary of State? _____ Yes _____ No

If no, why not? _____

(f) Fair Market Value of Corporate Assets, including going concern value \$ _____

Basis of value _____

(g) Amount of Corporate Debts \$ _____

4. Is the business cyclical? _____ Yes _____ No

If yes, when is the busy season? _____

If yes, when is the slow season? _____

5. Do you have an accountant or bookkeeper? _____ Yes _____ No

If yes, please provide the name, address and phone number of this individual _____

Do you understand that you are required to file monthly operating reports with the Court and serve the Trustee with a copy by the 15th of each month that you are in bankruptcy? _____ Yes _____ No

6. Are all tax returns which should have been filed to this point in time filed? _____ Yes _____ No

If no, list years that are delinquent, type of return owed, and entity to which return is owed:

Year	Entity(s) and Type of Return Due
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you understand that while you are in Chapter 13, you are individually responsible for keeping current with all of your post-petition business as well as personal tax obligations? _____ Yes _____ No

Do you understand that the Court in this District has entered a General Order which requires all delinquent tax returns to be filed within sixty (60) days from the date that you filed your bankruptcy case?

_____ Yes _____ No

7. Have you filed estimated quarterly income tax returns with the IRS? _____ Yes _____ No

If yes, please provide copies of the last three (3) estimated returns filed, with proof of payment.

If no, explain why not _____

8. Does the business have employees? _____ Yes _____ No

If yes, how many? _____ Are any of these persons related to you? _____ Yes _____ No

Does the business withhold from their wages? _____ Yes _____ No

If yes, where do you deposit the withholdings and how often?

i. _____

ii. _____

Please provide copies of proof of payment of employee withholding taxes for the three (3) months prior to the month that your case was filed.

Do you understand that you must keep the withholding funds separate from your general operating funds?

_____ Yes _____ No

If you do not withhold, how are the employees compensated? _____

Do you have subcontractors? _____ Yes _____ No

Are 1099s issued? _____ Yes _____ No

9. Is your business required to collect sales tax? _____ Yes _____ No

If yes, has your business collected and remitted sales taxes on a regular basis? _____ Yes _____ No

If no, explain why _____

Do you understand that you must keep the sales tax funds separate from your general operating funds?

_____ Yes _____ No

Please provide copies of proof of payment of sales taxes for three (3) months prior to the month your case was filed.

10. Are you leasing office space? _____ Yes _____ No

If yes, answer (a) to (e) below:

(a) Address of Property _____

(b) Landlord's Name and Address

(c) Monthly Rental Payment \$ _____

(d) Term of lease _____

(e) Do you wish to continue the lease? _____ Yes _____ No

11. Does the business lease business equipment or autos? _____ Yes _____ No

If yes, answer (a) to (e) below:

(a) Description of leased/rented items? _____

(b) Person or entity's name and address from which items are rented or leased _____

(c) Payment terms _____

(d) Term of lease _____

(e) Do you wish to continue the lease? _____ Yes _____ No

12. Does the business have any outstanding contracts? _____ Yes _____ No

If yes, please describe _____

13. If you rent real property owned by you to others, please complete the following:

Address of Tenant	Date Lease Began	Date Lease Ends	Amount of Monthly Rent
-------------------	------------------	-----------------	------------------------

14. Is the business required to have any business licenses or permits? _____ Yes _____ No

If yes, please list: _____

If yes, are licenses/permits current? _____ Yes _____ No

15. Does the business carry the following insurance policies?

Commercial Liability? _____ Yes _____ No Policy No. _____ Exp. Date _____

Workmans Compensation? _____ Yes _____ No Policy No. _____ Exp. Date _____

Fire Building? _____ Yes _____ No Policy No. _____ Exp. Date _____

Fire Contents? _____ Yes _____ No Policy No. _____ Exp. Date _____

Automobile Coverage? _____ Yes _____ No Policy No. _____ Exp. Date _____

Liquor liability? _____ Yes _____ No Policy No. _____ Exp. Date _____

List Others _____

Are all policies current? _____ Yes _____ No

List insurance agency(s) _____

Do you know that in order to continue the operation of your business, it is your responsibility to obtain and maintain comprehensive liability insurance for the operation for your business?

_____ Yes _____ No

16. Does the business keep inventory on hand? _____ Yes _____ No

If yes, what would you estimate the market value of your inventory to be? \$ _____

When was the last physical count of your inventory? _____

What was the value of the inventory at that time? \$ _____

Please provide a list of your inventory.

17. What is the balance of the business accounts receivable? \$ _____

What amount of the receivables is reasonably collectible? \$ _____

Please provide a copy of your accounts receivable ledger.

Have you pledged your receivables, rents, profits, or other cash as collateral for any loans?

_____ Yes _____ No

If yes, please identify _____

Do you understand that if you have borrowed money from any creditor and as security or collateral for the loan you have pledged accounts receivables, rents, or other cash, you may not use the accounts receivables, rents or cash without express written consent from the Creditor, or an order from the Bankruptcy Court allowing the use? _____ Yes _____ No

18. If you were to buy your business today, how much would you pay for it? \$ _____

I/We declare under penalty of perjury that the foregoing statement of information is true and correct to the best of my/our knowledge, information, and belief.

Dated: _____

Debtor's signature

Joint Debtor's signature

**CHECKLIST OF DOCUMENTS
THAT MUST BE RETURNED WITH YOUR QUESTIONNAIRE**

You must send copies of the following documents to Ronda J. Winnecour, the Trustee, along with your completed Questionnaire within 15 days before the first scheduled § 341 meeting date. Failure to do so may cause the Trustee to require your attendance at an additional meeting or file a motion to dismiss your case.

- _____ Operating statements showing income and expenses for the business for the twelve (12) months prior to the time of filing your bankruptcy case.
- _____ Bank statements for all accounts for the twelve (12) months prior to the time of filing your bankruptcy case.
- _____ Federal income tax returns with all accompanying schedules for the two (2) years prior to filing your bankruptcy case.
- _____ State income tax returns with all accompanying schedules for the two (2) years prior to filing your bankruptcy case.
- _____ Appraisals or other third party valuations of real estate, equipment, inventories and other business property listed in your bankruptcy schedules.
- _____ Financial statements furnished to third parties such as banks and trade creditors within the two (2) years prior to filing your bankruptcy case, including but not limited to the balance sheet, income statement and cash flow statement.
- _____ Current schedule of accounts receivable and accounts payable.
- _____ Current insurance policies that cover the assets listed in your bankruptcy schedules.
- _____ The business's check register for the three (3) months prior to filing your bankruptcy case.
- _____ If your business has employees, proof of payment of employee withholding taxes for the 3 months prior to the month your case was filed.
- _____ If your business is required to collect and remit sales taxes, proof of payment of sales taxes for the 3 months prior to the month your case was filed.
- _____ The last three (3) federal quarterly income tax returns with proof of payment.
- _____ Any partnership agreement that exists.
- _____ List of your inventory and equipment.

MONTHLY OPERATING REPORT FOR CHAPTER 13 CASES

Debtor's name _____

Case No. _____

Month _____

Year _____

Gross receipts for month:

(If more than one source, list each)

TOTAL GROSS RECEIPTS: \$ _____

Business expenses paid:

Description

Amount

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL EXPENSES: \$ _____

NET PROFIT OR (LOSS) FOR MONTH: \$ _____

Reports for each month are due by the 15th day of the following month and should be mailed to:

Chapter 13 Trustee, U.S. Steel Tower, Suite 3250, 600 Grant Street, Pittsburgh, PA 15219

USE ADDITIONAL SHEETS IF NEEDED

**BANKRUPTCY RULE 2015 AND SECTION 1304(c)
DUTY OF CHAPTER 13 DEBTORS ENGAGED IN A BUSINESS
TO KEEP RECORDS, MAKE REPORTS AND GIVE NOTICE OF CASE**

Bankruptcy Rule 2015 and Section 1304(c) of the Bankruptcy Code requires debtors engaged in business that file a Chapter 13 bankruptcy petition to:

- Keep a record of receipts and the disposition of money and property received.
- File with the Court, the Trustee, and with any governmental unit charged with responsibility for collection or determination of any tax arising out of such operation, periodic reports and summaries of the operation of the business, including a statement of receipts and disbursements, which shall include a statement, if payments are made to employees, or the amounts of deductions for all taxes required to be withheld or paid for on behalf of employees and the place where these amounts are deposited.
- As soon as possible after the commencement of the case, give notice of the case to every entity known to be holding money or property subject to withdrawal, including every bank, savings or buildings and loan association, public utility company, and the landlord with whom the debtor has a deposit, and to every insurance company which has issued a policy having a cash surrender value payable to the debtor, except that notice need not be given to any entity who has knowledge or has previously been notified of the case.

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re: _____ : Bankruptcy No.
 _____ :
 Debtor _____ :
 _____ : Chapter
 _____ :
 Movant _____ :
 _____ : Related to Document No.
 v. _____ :
 _____ :
 Respondent (if none, then "No Respondent") _____ :

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s), or statement(s) are transmitted herewith:

_____ Voluntary Petition - *Specify reason for amendment:*

Official Form 6 Schedules (Itemization of Changes Must Be Specified)

- _____ Summary of Schedules
- _____ Schedule A - Real Property
- _____ Schedule B - Personal Property
- _____ Schedule C - Property Claimed as Exempt
- _____ Schedule D - Creditors holding Secured Claims
 - Check one:
 - _____ Creditor(s) added
 - _____ NO creditor(s) added
 - _____ Creditor(s) deleted
- _____ Schedule E - Creditors Holding Unsecured Priority Claims
 - Check one:
 - _____ Creditor(s) added
 - _____ NO creditor(s) added
 - _____ Creditor(s) deleted
- _____ Schedule F - Creditors Holding Unsecured Nonpriority Claims
 - Check one:
 - _____ Creditor(s) added
 - _____ NO creditor(s) added
 - _____ Creditor(s) deleted
- _____ Schedule G - Executory Contracts and Unexpired Leases
 - Check one:
 - _____ Creditor(s) added
 - _____ NO creditor(s) added
 - _____ Creditor(s) deleted
- _____ Schedule H - Codebtors
- _____ Schedule I - Current Income of Individual Debtor(s)
- _____ Schedule J - Current Expenditures of Individual Debtor(s)
- _____ Statement of Financial Affairs
- _____ Chapter 7 Individual Debtor's Statement of Intention
- _____ Chapter 11 List of Equity Security Holders
- _____ Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims
- _____ Disclosure of Compensation of Attorney for Debtor
- _____ Other: _____

NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Fed.R.Bankr.P. 1009(a) and Local Bankruptcy Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as follows:

Date: _____

Attorney for Debtor(s) [or *pro se* Debtor(s)]

(Typed Name)

(Address)

(Phone No.)

List Bar I.D. and State of Admission

Note: An amended matrix of creditors added by the amendment must be submitted on disk with the amendment. Attorneys filing electronically on the Case Management/Electronic Case Filing System may add creditors to the case electronically.

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	Chapter
Debtor	:	
	:	
Movant	:	Related to Document No.
	:	
v.	:	Hearing Date and Time:
	:	
Respondent (if none, then "No Respondent")	:	

CERTIFICATE OF SERVICE OF (Specify Document Served)

I certify under penalty of perjury that I served the above captioned pleading on the parties at the addresses specified below or on the attached list on (date) _____.

The type(s) of service made on the parties (first-class mail, electronic notification, hand delivery, or another type of service) was: _____.

If more than one method of service was employed, this certificate of service groups the parties by the type of service. For example, the names and addresses of parties served by electronic notice will be listed under the heading "Service by Electronic Notification," and those served by mail will be listed under the heading "Service by First-Class Mail."

EXECUTED ON:

By: _____
Signature

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
	:	Debtor
	:	
	:	Chapter
	:	
Movant	:	
	:	Related to Document No.
	:	
v.	:	
	:	
	:	Hearing Date and Time
Respondent (if none, then "No Respondent")	:	

**SUMMARY COVER SHEET AND NOTICE OF HEARING ON PROFESSIONAL FEES
IN CHAPTERS 7, 12 AND 13 ON BEHALF OF**

To All Creditors and Parties in Interest:

1. Applicant represents _____
2. This is (check one)
 - _____ a final application
 - _____ an interim application
 for the period _____ to _____
3. Previous retainer paid to Applicant: \$ _____
4. Previous interim compensation allowed to Applicant: \$ _____
5. Applicant requests additional:
 - Compensation of \$ _____
 - Reimbursement of Expenses of \$ _____
6. A hearing on the Application will be held in Courtroom _____, _____, at _____m., on _____.
7. Any written objections must be filed with the court and served on the Applicant on or before _____, _____, (fourteen (14) days from the date of this notice plus an additional three (3) days if served by mail). Copies of the application are available from the applicant.

Date of service:

Signature of Applicant or Attorney for Applicant

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

(Note: 1. Scheduling dates in this Notice shall comply with Local Rules. 2. The full application need be served only upon Debtor, counsel for Debtor, the U.S. Trustee, and the trustee and counsel for the trustee. 3. Applicant shall serve this Notice on all creditors and parties in interest including any person who has filed a request for notices. 4. A certificate of service shall be filed with this Notice and the application.)

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	Chapter
	:	
Movant	:	Related to Document No.
	:	
v.	:	
	:	Hearing Date and Time:
Respondent (if none, then "No Respondent")	:	

**SUMMARY COVER SHEET
FOR FEE APPLICATIONS IN CHAPTER 11 AND CHAPTER 15**

1. Your applicant was appointed on _____.
(Attach a copy of the order approving appointment.)
2. Your applicant represents _____.
3. The total amount of the compensation requested is \$_____ for the period from _____ to _____.
4. The compensation is _____.
(State whether interim or final compensation.)
5. A retainer of \$_____ was paid on _____.
6. The amount of compensation previously requested is \$_____.
7. The amount of compensation previously approved is \$_____.
8. The amount of compensation previously paid is \$_____.
9. The total amount of expenses for which reimbursement is sought is \$_____ and is for the period from _____ to _____.
10. The amount of expenses previously requested is \$_____.
11. The amount of expenses previously approved is \$_____.
12. The amount of expenses previously paid is \$_____.
13. The blended hourly rate for this application is \$_____.

14. Other factors bearing on fee application:

DATE: _____

By: _____
Signature

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

**APPENDIX
EXAMPLE OF CATEGORY LISTING OF TIME AND SERVICES
PURSUANT TO W.PA.LBR 2016-1(c)(5)(A)**

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	
	:	Chapter
	:	
Movant	:	
	:	Related to Document No.
v.	:	
	:	
	:	Hearing Date and Time:
Respondent (if none, then "No Respondent")	:	

PART "A"

Category Listing of time and services or tasks by category on behalf of Acme Shoe Company, Debtor, during the period from May 1, 1985 to the closing of the case.

CATEGORY 1. - Sale of real estate at 320 Grant Avenue, Pittsburgh, PA to Jones Company for \$_____ including negotiations with purchaser, drafting Agreement of Sale, lien search, preparation and filing of Motion and Order for sale, hearing on sale and closing on sale and preparation and filing of report of sale. After payment of all liens and expenses of sale the estate netted \$_____.

<u>DATE</u>	<u>ATTY</u>	<u>DESCRIPTION OF SERVICE</u>	<u>HOURS</u>
5/1/85	RB	Conference with Jones Company representatives re: potential purchase of 320 Grant Avenue	
5/3/85	RB	Preparation of Agreement of Sale for 320 Grant Avenue	

TOTAL IN CATEGORY 1:

CATEGORY 2. - Distribution to Creditors per Order of August 14, 2002, including preparation and filing of Motion, obtaining Order of Court and making the distribution of \$_____ to priority creditors and \$_____ as a _____% distribution to Class 4 general creditors.

<u>DATE</u>	<u>ATTY</u>	<u>DESCRIPTION OF SERVICE</u>	<u>HOURS</u>
9/17/85	JS	Review & Sign Distribution Checks	
9/18/85	JS	Covering letters to all creditors, Anderson, Wagner, Bernstein & Debtor re the distribution	

TOTAL IN CATEGORY 2:

CATEGORY 3. - Tax returns and tax refund including arranging for filing of final returns, numerous calls and letters to Pennsylvania Department of Revenue resulting in tax refund of \$12,435.04.

5/02/85	JS	Telephone Call: Virginia Vatz of Pa. Dept. of Revenue re tax refund
5/04/85	JS	Letter: PA Dept. of Revenue re status of tax returns

TOTAL IN CATEGORY 3:

TOTAL TIME IN ALL CATEGORIES:

DISBURSEMENTS

6/24/85	JS	Copy Expense
8/23/85	JS	Copy Expense and postage on distribution

TOTAL DISBURSEMENTS:

BILLING SUMMARY

JS	Hrs.	Min.	\$135.00	\$
RB	Hrs.	Min.	\$125.00	-
CLIENT TOTAL			-	\$
CURRENT BILLING:				\$
CURRENT EXPENSES:				
TOTAL AMOUNT DUE:				\$

**EXAMPLE OF CHRONOLOGICAL SUMMARY OF TIME AND SERVICES
PURSUANT TO W.PA.LBR 2016-1(c)(5)(B)**

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	
	:	Chapter
	:	
Movant	:	
	:	Related to Document No.
v.	:	
	:	
	:	
Respondent (if none, then "No Respondent")	:	

PART A

CHRONOLOGICAL SUMMARY OF TIME AND SERVICES
RENDERED ON BEHALF OF DEBTOR DURING PERIOD
FROM MAY 1, 1985 TO CONCLUSION OF CASE

<u>DATE</u>	<u>ATTY</u>	<u>DESCRIPTION OF SERVICE</u>	<u>HOURS</u>
5/1/85	RB	Conference with Jones Co. representative re: potential purchase of 320 Grant Avenue	
5/2/85	JS	Telephone call: Virginia Vatz and Pa. Dept. of Revenue Re: tax refund	
5/3/85	RB	Preparation of Agreement of Sale for 320 Grant Avenue	
5/4/85	JS	Letter: Pa. Dept. of Revenue re: status of tax claim	
9/17/85	JS	Review & Sign: Distribution checks	
9/18/85	JS	Covering letters to all creditors, Anderson, Wagner, Bernstein & Debtor re: the distributions	
TOTAL HOURS			
			<u>DISBURSEMENTS</u>
6/24/85	JS	Copy Expense	\$
8/23/85	JS	Copy Expense and postage on distribution	\$
TOTAL DISBURSEMENTS			\$

BILLING SUMMARY

JS	2 Hrs. 0 Min.	\$135.00	\$
RB	2 Hrs. 0 Min.	\$125.00	\$
CLIENT TOTAL:			\$
CURRENT BILLING:			\$
CURRENT EXPENSES:			\$
TOTAL AMOUNT DUE:			\$

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	Chapter
	:	
Movant	:	Related to Document No.
	:	
v.	:	
	:	Hearing Date and Time:
Respondent (if none, then "No Respondent")	:	

PART "B"

CATEGORY LISTING OF TIME AND SERVICES
ON BEHALF OF ACME SHOE COMPANY, DEBTOR, DURING THE PERIOD
FROM MAY 1, 1985 TO THE CLOSING OF THE CASE.

- | | | | |
|------|---|------|------|
| I. | <p><u>Category 1.</u> - Sale of real estate at 320 Grant Avenue, Pittsburgh, PA to Jones Company for \$30,000.00 including negotiations with purchaser, drafting Agreement of Sale, lien search, preparation and filing of Motion and Order for sale, hearing on sale and closing on sale and preparation and filing of report of sale. After payment of all liens and expenses of sale the estate netted \$24,500.00</p> | hrs. | min. |
| II. | <p><u>Category 2.</u> - Distribution to Creditors per Order of August 14, 1985, including preparation and filing of Motion, obtaining Order of Court and making the distribution of \$36,533.61 to priority creditors and \$21,794.45 as a 4% distribution to Class 4 general creditors</p> | hrs. | min. |
| III. | <p><u>Category 3.</u> - Tax returns and tax refund including arranging for filing of final returns, numerous calls and letters to Pennsylvania Department of Revenue resulting in tax refund of \$12,435.04</p> | hrs. | min. |
| | TOTAL | hrs. | |

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

Bankruptcy Case Number _____

Debtor#1: _____ Last Four (4) Digits of SSN: _____

Debtor#2: _____ Last Four (4) Digits of SSN: _____

Check if applicable [] Amended Plan [] Plan expected to be completed within the next 12 months

CHAPTER 13 PLAN DATED _____
COMBINED WITH CLAIMS BY DEBTOR PURSUANT TO RULE 3004

UNLESS PROVIDED BY PRIOR COURT ORDER THE OFFICIAL PLAN FORM MAY NOT BE MODIFIED

PLAN FUNDING

Total amount of \$ _____ per month for a plan term of _____ months shall be paid to the Trustee from future earnings as follows:
Payments: By Income Attachment Directly by Debtor By Automated Bank Transfer
D#1 \$ _____ \$ _____ \$ _____
D#2 \$ _____ \$ _____ \$ _____
(Income attachments must be used by Debtors having attachable income) (SSA direct deposit recipients only)

Estimated amount of additional plan funds from sale proceeds, etc.: \$ _____
The Trustee shall calculate the actual total payments estimated throughout the plan.
The responsibility for ensuring that there are sufficient funds to effectuate the goals of the Chapter 13 plan rests with the Debtor.

PLAN PAYMENTS TO BEGIN: no later than one month following the filing of the bankruptcy petition.

FOR AMENDED PLANS:

- i. The total plan payments shall consist of all amounts previously paid together with the new monthly payment for the remainder of the plan's duration.
ii. The original plan term has been extended by _____ months for a total of _____ months from the original plan filing date;
iii. The payment shall be changed effective _____.
iv. The Debtor (s) have filed a motion requesting that the court appropriately change the amount of all wage orders.

The Debtor agrees to dedicate to the plan the estimated amount of sale proceeds: \$ _____ from the sale of this property (describe) _____. All sales shall be completed by _____. Lump sum payments shall be received by the Trustee as follows: _____.
Other payments from any source (describe specifically) _____ shall be received by the Trustee as follows: _____.

The sequence of plan payments shall be determined by the Trustee, using the following as a general guide:

- Level One: Unpaid filing fees.
Level Two: Secured claims and lease payments entitled to Section 1326 (a)(1)(C) pre-confirmation adequate protection payments.
Level Three: Monthly ongoing mortgage payments, ongoing vehicle and lease payments, installments on professional fees.
Level Four: Priority Domestic Support Obligations
Level Five: Post-petition utility claims.
Level Six: Mortgage arrears, secured taxes, rental arrears, vehicle payment arrears.
Level Seven: All remaining secured, priority and specially classified claims, miscellaneous secured arrears.
Level Eight: Allowed general unsecured claims.
Level Nine: Untimely filed unsecured claims for which the Debtor has not lodged an objection.

1. UNPAID FILING FEES _____

Filing fees: the balance of \$ _____ shall be fully paid by the Trustee to the Clerk of Bankruptcy Court from the first available funds.

2. PERSONAL PROPERTY SECURED CLAIMS AND LEASE PAYMENTS ENTITLED TO PRECONFIRMATION ADEQUATE PROTECTION PAYMENTS UNDER SECTION 1326 (a)(1)(C)

Creditors subject to these terms are identified below within parts 3b, 4b, 5b or 8b. Timely plan payments to the Trustee by the Debtor(s) shall constitute compliance with the adequate protection requirements of Section 1326 (a)(1)(C). Distributions prior to final plan confirmation shall be made at Level 2. Upon final plan confirmation, these distributions shall change to level 3. Leases provided for in this section are assumed by the Debtor(s).

3.(a) LONG TERM CONTINUING DEBTS CURED AND REINSTATED, AND LIEN (if any) RETAINED

Name of Creditor (include account #)	Description of Collateral (Address or parcel ID of real estate, etc.)	Monthly Payment (If changed, state effective date)	Pre-petition arrears to be cured (w/o interest, unless expressly stated)

3.(b). Long term debt claims secured by PERSONAL property entitled to §1326 (a)(1)(C) preconfirmation adequate protection payments:

--	--	--	--

4. SECURED CLAIMS TO BE PAID IN FULL DURING TERM OF PLAN, ACCORDING TO ORIGINAL CONTRACT TERMS, WITH NO MODIFICATION OF CONTRACTUAL TERMS AND LIENS RETAINED UNTIL PAID

4.(a) Claims to be paid at plan level three (for vehicle payments, do not use "pro rata" but instead, state the monthly payment to be applied to the claim):

Name of Creditor	Description of Collateral	Contractual Monthly Payment (Level 3)	Principal Balance Of Claim	Contract Rate of Interest

4(b) Claims entitled to preconfirmation adequate protection payments pursuant to Section 1326 (a)(1)(C) (Use only if claim qualifies for this treatment under the statute, and if claims are to be paid at level two prior to confirmation, and moved to level three after confirmation):

Name of Creditor	Description of Collateral	Contractual Monthly Payment (Level 3)	Principal Balance Of Claim	Contract Rate of Interest

5. SECURED CLAIMS TO BE FULLY PAID ACCORDING TO MODIFIED TERMS AND LIENS RETAINED

5.(a) *Claims to be paid at plan level three (for vehicle payments, do not use “pro rata”; instead, state the monthly payment to be applied to the claim)*

Name of Creditor	Description of Collateral	Modified Principal Balance	Interest Rate	Monthly Payment at Level 3 or Pro Rata

5.(b) *Claims entitled to preconfirmation adequate protection payments pursuant to Section 1326 (a)(1)(C) (Use only if claim qualifies for this treatment under the statute, and if claims are to be paid at level two prior to confirmation, and moved to level three after confirmation):*

Name of Creditor	Description of Collateral	Modified Principal Balance	Interest Rate	Monthly Payment at Level 3 or Pro Rata

6. SECURED CLAIMS NOT PAID DUE TO SURRENDER OF COLLATERAL; SPECIFY DATE OF SURRENDER

7. THE DEBTOR PROPOSES TO AVOID OR LIMIT THE LIENS OF THE FOLLOWING CREDITORS:

Name the Creditor and identify the collateral with specificity.	Name the Creditor and identify the collateral with specificity.

8. LEASES. Leases provided for in this section are assumed by the debtor(s). Provide the number of lease payments to be made by the Trustee.

8.(a) *Claims to be paid at plan level three (for vehicle payments, do not use “pro rata”; instead, state the monthly payment to be applied to the claim):*

Name of Creditor (include account#)	Description of leased asset	Monthly payment amount and number of payments	Pre-petition arrears to be cured (Without interest, unless expressly stated otherwise)

8.(b) Claims entitled to preconfirmation adequate protection payments pursuant to Section 1326 (a)(1)(C) (Use only if claim qualifies for this treatment under the statute, and if claims are to be paid at level two prior to confirmation, and moved to level three after confirmation):

Name of Creditor (include account#)	Description of leased asset	Monthly payment amount and number of payments	Pre-petition arrears to be cured (Without interest, unless expressly stated otherwise)

9. SECURED TAX CLAIMS FULLY PAID AND LIENS RETAINED

Name of Taxing Authority	Total Amount of Claim	Type of Tax	Rate of Interest *	Identifying Number(s) if Collateral is Real Estate	Tax Periods

* The secured tax claims of the Internal Revenue Service, Commonwealth of Pennsylvania and County of Allegheny shall bear interest at the statutory rate in effect as of the date of confirmation of the first plan providing for payment of such claims.

10. PRIORITY DOMESTIC SUPPORT OBLIGATIONS:

If the Debtor (s) is currently paying Domestic Support Obligations through existing state court order(s) and leaves this section blank, the Debtor (s) expressly agrees to continue paying and remain current on all Domestic Support Obligations through existing state court orders. If this payment is for prepetition arrearages only, check here: As to "Name of Creditor," specify the actual payee, e.g. PA SCUDU, etc.

Name of Creditor	Description	Total Amount of Claim	Monthly Payment or Prorata

11. PRIORITY UNSECURED TAX CLAIMS PAID IN FULL

Name of Taxing Authority	Total Amount of Claim	Type of Tax	Rate of Interest (0% if blank)	Tax Periods

12. ADMINISTRATIVE PRIORITY CLAIMS TO BE FULLY PAID

- a. Percentage fees payable to the Chapter 13 Fee and Expense Fund shall be paid at the rate fixed by the United States Trustee.
- b. Attorney fees are payable to _____. In addition to a retainer of \$_____ already paid by or on behalf of the Debtor, the amount of \$_____ is to be paid at the rate of \$_____ per month. Including any retainer paid, a total of \$_____ has been approved pursuant to a fee application. An additional \$_____ will be sought through a fee application to be filed and approved before any additional amount will be paid thru the Plan.

13. OTHER PRIORITY CLAIMS TO BE PAID IN FULL

Name of Creditor	Total Amount of Claim	Interest Rate (0% if blank)	Statute Providing Priority Status

14. POST-PETITION UTILITY MONTHLY PAYMENTS. This provision completed only if utility provider has agreed to this treatment.

These payments comprise a single monthly combined payment for post-petition utility services, any post-petition delinquencies and unpaid security deposits. The claim payment will not change for the life of the plan. Should the utility file a motion requesting a payment change, the Debtor will be required to file an amended plan. These payments may not resolve all of the post-petition claims of the utility. The utility may require additional funds from the Debtor (s) after discharge.

Name of Creditor	Monthly Payment	Post-petition Account Number

15. CLAIMS OF UNSECURED NONPRIORITY CREDITORS TO BE SPECIALLY CLASSIFIED. If the following is intended to be treated as long term continuing debt treatment pursuant to Section 1322(b)(5) of the Bankruptcy Code, check here:

Name of Creditor	Principal Balance or Long Term Debt	Rate of Interest (0% if blank)	Monthly Payments	Arrears to be Cured	Interest Rate on Arrears

16. CLAIMS OF GENERAL, NONPRIORITY UNSECURED CREDITORS

Debtor(s) ESTIMATE that a total of \$_____ will be available for distribution to unsecured, non-priority creditors. Debtor(s) UNDERSTAND that a MINIMUM of \$_____ shall be paid to unsecured, non-priority creditors in order to comply with the liquidation alternative test for confirmation. The total pool of funds estimated above is NOT the MAXIMUM amount payable to this class of creditors. Instead, the actual pool of funds available for payment to these creditors under the plan base will be determined only after audit of the plan at time of completion. The estimated percentage of payment to general unsecured creditors is _____%. The percentage of payment may change, based upon the total amount of allowed claims. Late-filed claims will not be paid unless all timely filed claims have been paid in full. Thereafter, all late-filed claims will be paid pro-rata unless an objection has been filed within 30 days of filing the claim. Creditors not specifically identified in Parts 1 - 15, above, are included in this class.

GENERAL PRINCIPLES APPLICABLE TO ALL CHAPTER 13 PLANS

This is the voluntary Chapter 13 reorganization plan of the Debtor (s). The Debtor (s) understand and agree that the Chapter 13 plan may be extended as necessary by the Trustee, to not more than 60 (sixty) months, in order to insure that the goals of the plan have been achieved. Property of the estate shall not re-vest in the Debtor (s) until the bankruptcy case is closed.

The Debtor (s) shall comply with the tax return filing requirements of Section 1308, prior to the Section 341 Meeting of Creditors, and shall provide the Trustee with documentation of such compliance at or before the time of the Section 341 Meeting of Creditors. Counsel for the Debtor(s), or Debtor (if not represented by counsel), shall provide the Trustee with the information needed for the Trustee to comply with the requirements of Section 1302 as to notification to be given to Domestic Support Obligation creditors, and Counsel for the Debtor(s), or Debtor (if pro se) shall provide the Trustee with the calculations relied upon by Counsel to determine the Debtor (s)' current monthly income and disposable income.

As a condition to eligibility of the Debtor(s) to receive a discharge upon successful completion of the plan, Counsel for the debtor(s), or the debtor(s) if not represented by counsel, shall file with the Court a certification:

- (1) that the debtor(s) is entitled to a discharge under the terms of Section 1328 of the Bankruptcy Code;
- (2) specifically certifying that all amounts payable under a judicial or administrative order or, by statute, requiring the debtor(s) to pay a domestic support obligation that are due on or before the date of the certification (including amounts due before the petition was filed, but only to the extent provided for by the plan) have been paid;
- (3) that the debtor(s) did not obtain a prior discharge in bankruptcy within the time frames specified in Section 1328(f)(1) or (2);
- (4) that the debtor(s) has completed an instructional course concerning personal financial management within the meaning of Section 1328(g)(1); and
- (5) that Section 1328(h) does not render the debtor(s) ineligible for a discharge.

All pre-petition debts are paid through the Trustee. Additionally, ongoing payments for vehicles, mortgages and assumed leases are also paid through the Trustee, unless the Court orders otherwise.

Percentage fees to the Trustee are paid on all distributions at the rate fixed by the United States Trustee. The Trustee has the discretion to adjust, interpret and implement the distribution schedule to carry out the plan. The Trustee shall follow this standard plan form sequence unless otherwise ordered by the Court.

The provisions for payment to secured, priority and specially classified creditors in this plan shall constitute claims in accordance with Bankruptcy Rule 3004. Proofs of claim by the Trustee will not be required. The Clerk shall be entitled to rely on the accuracy of the information contained in this plan with regard to each claim. If the secured, priority or specially classified creditor files its own claim, then the creditor's claim shall govern, provided the Debtor (s) and Debtor (s)' counsel have been given notice and an opportunity to object. The Trustee is authorized, without prior notice, to pay claims exceeding the amount provided in the plan by not more than \$250.

Any Creditor whose secured claim is modified by the plan, or reduced by separate lien avoidance actions, shall retain its lien until the plan has been fully completed, or until it has been paid the full amount to which it is entitled under applicable non-bankruptcy law, whichever occurs earlier. Upon payment in accordance with these terms and successful completion of the plan by the Debtor (s), the creditor shall promptly cause all mortgages and liens encumbering the collateral to be satisfied, discharged and released

Should a pre-petition Creditor file a claim asserting secured or priority status that is not provided for in the plan, then after notice to the Trustee, counsel of record, (or the Debtor (s) in the event that they are not represented by counsel), the Trustee shall treat the claim as allowed unless the Debtor(s) successfully objects.

Both of the preceding provisions will also apply to allowed secured, priority and specially classified claims filed after the bar date. LATE-FILED CLAIMS NOT PROPERLY SERVED ON THE TRUSTEE AND THE DEBTOR(S)' COUNSEL OF RECORD (OR DEBTOR, IF PRO SE) WILL NOT BE PAID. The responsibility for reviewing the claims and objecting where appropriate is placed on the Debtor.

BY SIGNING THIS PLAN THE UNDERSIGNED, AS COUNSEL FOR THE DEBTOR(S), OR THE DEBTOR(S) IF NOT REPRESENTED BY COUNSEL, CERTIFY THAT I/WE HAVE REVIEWED ANY PRIOR CONFIRMED PLAN(S), ORDER(S) CONFIRMING PRIOR PLAN(S), PROOFS OF CLAIM FILED WITH THE COURT BY CREDITORS, AND ANY ORDERS OF COURT AFFECTING THE AMOUNT(S) OR TREATMENT OF ANY CREDITOR CLAIMS, AND EXCEPT AS MODIFIED HEREIN, THAT THIS PROPOSED PLAN CONFORMS TO AND IS CONSISTENT WITH ALL SUCH PRIOR PLANS, ORDERS AND CLAIMS. FALSE CERTIFICATIONS SHALL SUBJECT THE SIGNATORIES TO SANCTIONS UNDER FED.R.BANK.P. 9011.

Attorney Signature _____

Attorney Name and Pa. ID # _____

Attorney Address and Phone _____

Debtor Signature _____

Debtor Signature _____

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor(s)	:	
	:	Chapter 13
Trustee, or Debtors(s), Movant	:	
	:	Motion No. <input type="checkbox"/> WO-1
v.	:	Motion No. <input type="checkbox"/> WO-2
	:	
Respondents	:	

EX PARTE MOTION FOR ORDER TO PAY TRUSTEE PURSUANT TO WAGE ATTACHMENT

The undersigned respectfully represents as follows:

1. A Chapter 13 case was filed.
2. It appears that the Debtor receives regular income which may be attached under 11 U.S.C. §1326 to fund the Chapter 13 Plan.
3. The likelihood of success in the case will be much greater if the Debtor’s income is attached to fund the plan.

WHEREFORE, the Chapter 13 Trustee and/or the Debtor respectfully request that this Court enter an Order to Pay Trustee in the form attached.

Signature of Chapter 13 Trustee or Attorney for Debtor(s)

Typed Name of Chapter 13 Trustee or Attorney for Debtor(s)

Address of Chapter 13 Trustee or Attorney for Debtor(s)

Phone No. and Pa. I.D. No. of Chapter 13 Trustee or
Attorney for Debtor(s)

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re: : Bankruptcy No.
Debtor : Chapter 13
Standing Chapter 13 Trustee or Debtor(s) :
Movant : Related to Document No.
v. :
Respondent(s) :

ORDER TO PAY TRUSTEE PURSUANT TO WAGE ATTACHMENT

The above-named Debtor(s) having filed a Chapter 13 petition and Debtor(s) or Trustee having moved to attach wages to fund the Chapter 13 Plan:

IT IS, THEREFORE, ORDERED that until further order of this Court, the entity from which the Debtor receives income:

shall deduct from that income the sum of \$ _____, beginning on the next pay day following receipt of this order and shall deduct a similar amount each pay period thereafter, including any period for which the Debtor receives a periodic or lump sum payment as a result of vacation, termination, or other benefit arising out of present or past employment, or from any other benefits payable to the Debtor, and shall remit the deducted sums ON AT LEAST A MONTHLY BASIS to:

RONDA J. WINNECOUR
CHAPTER 13 TRUSTEE, W.D.PA.
P.O. BOX 1132
MEMPHIS, TN 38101-1132

IT IS FURTHER ORDERED that the above-named entity shall notify the Chapter 13 Trustee if the Debtor's income is terminated and the reason therefor.

IT IS FURTHER ORDERED that the Debtors shall serve this order and a copy of the Notification of Debtor's Social Security Number, Local Bankruptcy Form 12, that includes the debtor's full Social Security number on the above-named entity. Debtor shall file a certificate of service regarding service of the order and local form, but the Social Security number shall not be included on the certificate.

IT IS FURTHER ORDERED that all remaining income of the Debtor, except the amounts required to be withheld for taxes, Social Security, insurance, pension, or union dues shall be paid to the Debtor in accordance with usual payment procedures.

IT IS FURTHER ORDERED THAT NO OTHER DEDUCTIONS FOR GARNISHMENT, WAGE ASSIGNMENT, CREDIT UNION, OR OTHER PURPOSE SHALL BE MADE FROM THE INCOME OF DEBTOR WITH THE SOLE EXCEPTION OF ANY SUPPORT PAYMENTS.

IT IS FURTHER ORDERED that this order supersedes previous orders made to the above-named entity in this case.

IT IS FURTHER ORDERED that the above-named entity shall not charge any fee to the Debtor for the administration of this attachment order, except as may be allowed upon application to and order of this Court.

DATED this _____ day of _____, _____.

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor(s)	:	Chapter
	:	
Movant (s)	:	Related to Document No.
	:	
v.	:	
	:	
Respondent(s)	:	

NOTIFICATION OF DEBTOR'S SOCIAL SECURITY NUMBER

Name of employer or other party subject to wage attachment:

Debtor's name:

Debtor's nine-digit Social Security number: __ __ __ - __ __ - __ __ __ __

Debtor's address:

Debtor's phone number:

This notification is accompanied by a Wage Attachment Order issued by a United States Bankruptcy Judge regarding attachment of the debtor's wages. The debtor's Social Security number is being provided to assist in complying with the court order.

DATE: _____

Signature: Attorney for Debtor(s) [or pro se Debtor(s)]

(Typed Name)

(Address)

(Phone No.)

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:

Bankruptcy No.

**DISCLOSURE STATEMENT
TO ACCOMPANY PLAN DATED _____**

Chapter 11 Small Business (Check box only if debtor has elected to be considered a small business under 11 U.S.C. §1121(e))

Debtor furnishes this disclosure statement to creditors in the above-captioned matter pursuant to Bankruptcy Code §1125 to assist them in evaluating debtor's proposed Chapter 11 plan, a copy of which is attached hereto. Creditors may vote for or against the plan of reorganization. Creditors who wish to vote must complete their ballots and return them to the following address before the deadline noted in the order approving the disclosure statement and fixing time. The Court will schedule a hearing on the plan pursuant to 11 U.S.C. §1129.)

Address for return of ballots:

I. Background

1. Name of Debtor

2. Type of Debtor (individual, partnership, corporation)

3. Debtor's Business or Employment

4. Date of Chapter 11 Petition

5. Events that Caused the Filing:

6. Anticipated Future of the Company & Source of this Information and Opinion

7. Summarize all Significant Features of the Plan Including When and How Each Class of Creditor Will Be Paid and What, If Any, Liens Will Be Retained By Secured Creditors or Granted to Any Creditor Under the Plan

8. Are All Monthly Operating Statements Current and on File With The Clerk of Court?
Yes _____ No _____

If Not, Explain:

9. Does the plan provided for releases of nondebtor parties? Specify which parties and terms of release.

10. Identify all executory contracts that are to be assumed or assumed and assigned.

11. Has a bar date been set? Yes _____ No _____
(If not, a motion to set the bar date has been filed simultaneously with the filing of this disclosure statement.)

12. Has an election under 11 U.S.C. §1121(e) has been filed with the Court to be treated as a small business?
Yes _____ No _____

13. Specify property that will be transferred subject to 11 U.S.C. §1146(c).

II. Creditors

A. Secured Claims

SECURED CLAIMS

Creditor	Total Amount Owed	Arrearages	Type of Collateral Priority of Lien (1, 2, 3)	Disputed (D) Liquidated (L) Unliquidated (U)	Will Liens Be Retained Under the Plan? (Y) or (N)
TOTAL	\$	\$			

B. Priority Claims

PRIORITY CLAIMS

Creditor	Total Amount Owed	Type of Collateral	(D) (L) (U) *
TOTAL	\$		

* Disputed (D), Liquidated (L), or Unliquidated (U)

C. Unsecured Claims

1.	Amount Debtor Scheduled (Disputed and Undisputed)	\$
2.	Amount of Unscheduled Unsecured Claims ¹	\$
3.	Total Claims Scheduled or Filed	\$
4.	Amount Debtor Disputes	\$
5.	Estimated Allowable Unsecured Claims	\$

D. Other Classes of Creditors

1.	Amount Debtor Scheduled (Disputed and Undisputed)	\$
2.	Amount of Unscheduled Claims ¹	\$
3.	Total Claims Scheduled or Filed	\$
4.	Amount Debtor Disputes	\$
5.	Estimated Allowable Claims	\$

E. Other Classes of Interest Holders

1.	Amount Debtor Scheduled (Disputed and Undisputed)	\$
2.	Amount of Unscheduled Claims ¹	\$
3.	Total Claims Scheduled or Filed	\$
4.	Amount Debtor Disputes	\$
5.	Estimated Allowable Claims	\$

¹ Includes (a.) unsecured claims filed by unscheduled creditors; (b.) that portion of any unsecured claim filed by a scheduled creditor that exceeds the amount debtor scheduled; and (c.) any unsecured portion of any secured debt not previously scheduled.

III. Assets

ASSETS

Assets	Value	Basis for Value Priority of Lien	Name of Lien Holder (if any) (Fair Market Value/ Book Value)	Amount of Debtor's Equity (Value Minus Liens)	
\$ TOTAL					\$ TOTAL

1. Are any assets which appear on Schedule A or B of the bankruptcy petition not listed above?
 If so, identify asset and explain why asset is not in estate:

2. Are any assets listed above claimed as exempt? If so attach a copy of Schedule C and any amendments.

IV. SUMMARY OF PLAN

1. Effective Date of Plan:
2. Will cramdown be sought? ___ Yes ___ No
If Yes, state bar date: _____
3. Treatment of Secured **Non-Tax** Claims

SECURED NON-TAX CLAIMS

Name of Creditor	Class	Amount Owed	Summary of Proposed Treatment
TOTAL		\$	

4. Treatment of Secured Tax Claims

SECURED TAX CLAIMS

Name of Creditor	Class	Amount Owed	Summary of Proposed Treatment
TOTAL		\$	

5. Treatment of Administrative **Non-Tax** Claims²

ADMINISTRATIVE NON-TAX CLAIMS

Name of Creditor*	Amount Owed	Type of Debt**	Summary of Proposed Treatment and Date of First Payment

6. Treatment of Administrative Tax Claims

ADMINISTRATIVE TAX CLAIMS

Name of Creditor*	Amount Owed	Type of Debt**	Summary of Proposed Treatment and Date of First Payment

* Identify and Use Separate Line for Each Professional and Estimated Amount of Payment

* Type of Debt (P=Professional, TD=Trade, TX=Tax)

² Include all §503(b) administrative claims.

8. Treatment of Priority Tax Claims³

PRIORITY TAX CLAIMS

Name of Creditor	Class	Amount Owed	Date of Assessment	Summary of Proposed Treatment

³ Include dates when any §507(a)(7) taxes were assessed.

9. Treatment of General Unsecured Non-Tax Claims

GENERAL UNSECURED NON-TAX CLAIMS

Creditor	Class	Total Amount Owed	Percent of Dividend
TOTAL		\$	

10. Treatment of General Unsecured Tax Claims

GENERAL UNSECURED TAX CLAIMS

Creditor	Class	Total Amount Owed	Percent of Dividend
TOTAL		\$	

11. Will periodic payments be made to unsecured creditors?

Yes _____ No _____ First payment to begin _____

If so:

Amount of each payment (aggregate to all unsecured claimants)

Estimated date of first payment:

Time period between payments:

Estimated date of last payment:

Contingencies, if any:

State source of funds for planned payments, including funds necessary for capital replacement, repairs, or improvements:

Other significant features of the plan:

Include any other information necessary to explain this plan:

V. Comparison of Plan with Chapter 7 Liquidation

If debtor's proposed plan is not confirmed, the potential alternatives would include proposal of a different plan, dismissal of the case or conversion of the case to Chapter 7. If this case is converted to Chapter 7, a trustee will be appointed to liquidate the debtor's non-exempt assets. In this event, all secured claims and priority claims, including all expenses of administration, must be paid in full before any distribution is made to unsecured claimants.

Total value of Chapter 7 estate (See Section III)	\$
1. Less secured claims (See Section IV-2)	
2. Less administrative expenses (See Section IV-3 and include approximate Chapter 7 expenses)	\$
3. Less other priority claims (See Section IV-4)	\$
 Total Amount Available for Distribution to Unsecured Creditors	 \$
 Divided by total allowable unsecured claims of (See Section II C)	 \$
 Percentage of Dividend to Unsecured Creditors:	

Will the creditors fare better under the plan than they would in a Chapter 7 liquidation?

Yes _____ No _____

Explain:

VI. Feasibility

- A. Attach Income Statement for Prior 12 Months.
- B. Attach Cash Flow Statement for Prior 12 Months.
- C. Attach Cash Flow Projections for Next 12 Months.

Estimated amount to be paid on effective date of plan, including administrative expenses.

\$ _____

Show how this amount was calculated.

\$	Administrative Class
\$	Taxes
\$	Unsecured Creditors
\$ _____	UST Fees
<u>\$ _____</u>	TOTAL

What assumptions are made to justify the increase in cash available for the funding of the plan?

Will funds be available in the full amount for administrative expenses on the effective date of the plan? From what source? If not available, why not and when will payments be made?

Cash on hand \$ _____ (Current). Attach current bank statement.

Cash on hand \$ _____ (Estimated amount available on date of confirmation)

If this amount is less than the amount necessary at confirmation, how will debtor make up the shortfall?

VII. Management Salaries

MANAGEMENT SALARIES

Position/Name of Person Holding Position	Salary at Time of Filing	Proposed Salary (Post-Confirmation)

VIII. Identify the Effect on Plan Payments and Specify Each of the Following:

1. What, if any, litigation is pending?

2. What, if any, litigation is proposed or contemplated?

IX. Additional Information and Comments

IX. Certification

The undersigned hereby certifies that the information herein is true and correct to the best of my knowledge and belief formed after reasonable inquiry.

If Debtor is a corporation, attach a copy of corporate resolution authorizing the filing of this Disclosure Statement and Plan.

If Debtor is a general partnership, attach a copy of the consent agreement of all general partners to the filing of the bankruptcy.

Signature of Debtor
or Authorized Representative

Date

Signature of Debtor
or Authorized Representative

Date

Debtor's Counsel

Date

OPTIONAL TABLE

6. Treatment of Other Claims

N/A

OTHER CLASSES OF CREDITORS

Creditor	Class	Total Amount Owed	Percent of Dividend

A. Will periodic payments be made?

Yes ____ No ____

If so:

Amount of each payment (aggregate to all claimants) \$ _____

Estimated date of first payment _____

Time period between payments _____

Estimated date of last payment _____

Contingencies, if any: _____

OPTIONAL TABLE

7. Treatment of Interest Holders (Other Than Equity Holders)

OTHER CLASSES OF INTEREST HOLDERS

Creditor	Class	Total Amount Owed	Percent of Dividend

8. Treatment of Equity Holders (Specify how the market test of *Bank of America National Trust and Savings Association v. 203 North LaSalle Street Partnership*, 526 U.S. 434, 110 S.Ct. 1411 (1999), is met)

EQUITY HOLDERS

Creditor	Class	Total Amount Owed	Percent of Dividend

A. Will periodic payments be made?

Yes ____ No ____

If so:

Amount of each payment (aggregate to all claimants) \$ _____

Estimated date of first payment _____

Time period between payments _____

Estimated date of last payment _____

Contingencies, if any:

1994

HISTORIC SUMMARY

POST PETITION PERIODS	MONTH ONE	MONTH TWO	MONTH THREE	MONTH FOUR	MONTH FIVE	MONTH SIX	MONTH SEVEN	MONTH EIGHT	MONTH NINE	MONTH TEN	MONTH ELEVEN	MONTH TWELVE
1. TOTAL CASH FLOW FROM OPERATIONS:	\$10,000	\$12,000	\$14,000	\$9,000	\$15,000	\$18,000	\$14,000	\$22,000	\$35,000	\$30,000	\$38,000	\$36,000
2. LESS TOTAL DISBURSEMENTS EXCLUDING PAYMENTS TO CREDITORS IN A PLAN:	\$10,000	\$14,000	\$12,000	\$10,000	\$12,000	\$15,000	\$12,500	\$16,000	\$30,000	\$23,000	\$30,000	\$30,000
3. TOTAL NET CASH FLOW:	0	(2,000)	2,000	(1,000)	3,000	3,000	1,500	6,000	5,000	7,000	8,000	6,000

DEFINITIONS

TOTAL CASH FLOW FROM OPERATIONS:

THE TOTAL AMOUNT OF FUNDS COLLECTED IN A SPECIFIC PERIOD FROM CASH SALES, COLLECTION OF ACCOUNTS RECEIVABLE, AND OTHER INCOME, EXCLUDING LOANS PROCEEDS, CASH CONTRIBUTIONS FROM INSIDERS, AND SALES TAXES COLLECTED.

TOTAL DISBURSEMENTS EXCLUDING PAYMENTS TO CREDITORS IN A PLAN:

THE TOTAL DISBURSEMENTS IN A SPECIFIC PERIOD FOR PRODUCTION COSTS, GENERAL AND ADMINISTRATIVE COSTS, EXCLUDING PAYMENTS TO CREDITORS TO BE PAID UNDER THE TERMS OF

PROJECTED SUMMARY

POST PETITION PERIODS	MONTH ONE	MONTH TWO	MONTH THREE	MONTH FOUR	MONTH FIVE	MONTH SIX	MONTH SEVEN	MONTH EIGHT	MONTH NINE	MONTH TEN	MONTH ELEVEN	MONTH TWELVE
4. TOTAL PROJECTED CASH FLOW FROM OPERATIONS:	\$38,000	\$40,000	\$41,000	\$43,000	\$45,000	\$45,000	\$46,000	\$47,000	\$48,000	\$48,000	\$48,000	\$50,000
5. LESS TOTAL PROJECTED DISBURSEMENTS EXCLUDING PMTS TO CREDITORS IN A PLAN:	\$30,000	\$32,000	\$32,000	\$32,000	\$33,000	\$33,000	\$35,000	\$35,000	\$38,000	\$38,000	\$38,000	\$39,000
6. ANTICIPATED CASH FLOW AVAILABLE FOR PLAN:	8,000	8,000	9,000	11,000	12,000	12,000	11,000	12,000	10,000	10,000	10,000	11,000

DEFINITIONS

TOTAL PROJECTED CASH FLOW FROM OPERATIONS:	TOTAL AMOUNT OF PROJECTED FUNDS COLLECTED IN A SPECIFIC PERIOD FROM CASH SALES, COLLECTION OF ACCOUNTS RECEIVABLE, AND OTHER INCOME, EXCLUDING LOANS PROCEEDS, CASH CONTRIBUTIONS FROM INSIDERS, AND SALES TAXES COLLECTED.
TOTAL DISBURSEMENTS EXCLUDING PAYMENTS TO CREDITORS IN A PLAN:	TOTAL PROJECTED DISBURSEMENTS IN A SPECIFIC PERIOD FOR PRODUCTION COSTS, GENERAL AND ADMINISTRATIVE COSTS, EXCLUDING PAYMENTS TO CREDITORS TO BE PAID UNDER THE TERMS OF THE PROPOSED PLAN.

PLAN FEASIBILITY

POST PETITION PERIODS	MONTH ONE	MONTH TWO	MONTH THREE	MONTH FOUR	MONTH FIVE	MONTH SIX	MONTH SEVEN	MONTH EIGHT	MONTH NINE	MONTH TEN	MONTH ELEVEN	MONTH TWELVE
ANTICIPATED RECEIPTS AVAILABLE FOR PLAN (SEE LINE 6, ABOVE):	\$8,000	\$8,000	\$9,000	\$11,000	\$12,000	\$12,000	\$11,000	\$12,000	\$10,000	\$10,000	\$10,000	\$11,000
LESS PROPOSED PLAN PAYMENTS (SEE SECTION IV):	\$5,000	\$5,000	\$5,000	\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,500	\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,000	\$ 5,000
OVERAGE/(SHORTAGE)OF CASH FLOW AVAILABLE TO FUND PLAN:	3,000	3,000	4,000	6,000	7,000	7,000	5,500	7,000	5,000	5,000	5,000	6,000

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor(s)	:	Chapter 11
	:	
Movant (s)	:	Related to Document No.
	:	
v.	:	
	:	
Respondent(s)	:	

REPORT FOR BANKRUPTCY JUDGES IN CASES TO BE CLOSED

CHAPTER 11 CASES

_____ Plan Confirmed

_____ Plan Not Confirmed

If plan was confirmed and the case is still in Chapter 11, what percentage dividend was (or is) to be paid under the plan to the general unsecured class of creditors: _____%

I certify under penalty of perjury that the information provided on this form is true and correct to the best of my knowledge, information, and belief and that all estimated payments have been designated appropriately as such.

DATE

PREPARER

SIGNATURE

RESERVED

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor(s)	:	Adversary No.
	:	
Plaintiff/Movant	:	
	:	
v.	:	
	:	
Defendant/Respondent	:	

CERTIFICATION THAT BRIEFING COMPLETED

I hereby certify that briefs in the above-captioned matter have been filed by the parties or that the deadline for filing all briefs has expired and the matter is ready for trial or other disposition by the Court.

DATE: _____

By: _____
Signature

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor(s)	:	Chapter
	:	
Movant (s)	:	
	:	Related to Document No.
v.	:	
	:	
Respondent(s)	:	

**MOTION FOR WITHDRAWAL OF APPEARANCE
AND TERMINATION OF CM/ECF RECORD**

AND NOW comes [attorney's name], counsel to [client's name] in the above-captioned case, and certifies to this Honorable Court that [he/she] (a) has satisfied the interest of [his/her] client [client's name] in the above-captioned case, and (b) has informed and received the consent of [client's name] to withdraw [his/her] appearance in the above-captioned case. Having so certified, and pursuant to W.PA.LBR 9010-2(b), [attorney's name] requests that this Honorable Court grant [his/her] request for leave for withdrawal of [his/her] appearance and termination of [his/her] CM/ECF record in this case.

Date: [date] Movant/Attorney: _____
[attorney's address]
[attorney's telephone number]
[attorney's Bar ID No.]

ORDER

Based on the foregoing Motion for Withdrawal of Appearance, and pursuant to W.PA.LBR 9010-2(b), it is hereby ORDERED that [attorney's name] is GRANTED leave to withdraw from the above-captioned case, and the Clerk shall terminate the corresponding CM/ECF attorney record in this case.

Date: [date] _____
United States Bankruptcy Judge

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	Chapter
	:	
Debtor	:	
Movant	:	
	:	Related to Document No.
v.	:	
	:	
Respondent (if applicable)	:	Hearing Date and Time:

MOTION FOR PRO HAC VICE ADMISSION

1. This motion for admission *pro hac vice* is being filed on behalf of: (Applicant's name, firm name, address, phone number, email address, Bar I.D. Number and State of Admission) by (Movant's name as identified in Paragraph 4 below).
2. Applicant represents (Name and address of client). Accompanying this Motion is the required \$40 filing fee paid using the Movant's CM/ECF account at the time of filing.
3. Applicant is a member in good standing of the Bar of _____, is not the subject of any pending disciplinary matters, is personally familiar with the *Local Bankruptcy Rules* of the United States Bankruptcy Court for the Western District of Pennsylvania and shall abide by those *Local Bankruptcy Rules*.
4. Applicant will be associated with the following attorney acting in this matter as local counsel, who is a member of the Bar of the Bankruptcy Court for the Western District of Pennsylvania: (Movant's name, firm name, address, phone number, email address, Bar I.D. Number and State of Admission).
5. Applicant and Movant have read and shall comply with Local Bankruptcy Rules 9010-1(b), 9010-1(c) and 9010-1(d).
6. Applicant has previously received *Pro Hac Vice* admission to this Court by Orders dated _____ in the following matters: (Applicant must identify each prior admission).

Date

By: _____
Signature of Movant

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	Chapter
	:	
Movant	:	Related to Document No.
	:	
v.	:	
	:	Hearing Date and Time:
Respondent(s)	:	

**APPEARANCE OF CHILD SUPPORT CREDITOR*
OR REPRESENTATIVE**

I certify under penalty of perjury that I am a child support creditor* of the above-named debtor, or the authorized representative of such child support creditor, with respect to the child support obligations which is set out below.

Name:
Organization:
Address:

Telephone Number:

_____ _____
Date Child Support Creditor* or Authorized Representative

<u>Summary of Child Support Obligation</u>	
Amount of arrears:	If Child Support has been assigned:
\$ _____	Amount of Support which is owed under assignments:
Amount currently due per week or per month: on a continuing basis:	\$ _____
\$ _____ (per week) (per month)	Amount owed primary child support Creditor (balance not assigned):
	\$ _____
Attach an itemized statement of account	

* Child support creditor includes both creditor to whom the debtor has a primary obligation to pay child support as well as any entity to whom such support has been assigned, if pursuant to Section 402(a)(26) of the Social Security Act or if such debt has been assigned to the Federal Government or to any State or political subdivision of a State.

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:)	
)	Bankruptcy No.
Debtor)	Adversary No.
)	Document No.
Plaintiff/Movant)	Chapter
)	Hearing Date & Time:
v.)	_____
)	
Defendant/Respondent)	

NOTICE AND ORDER SETTING HEARING ON AN EXPEDITED BASIS

NOTICE IS HEREBY GIVEN THAT an Expedited Motion for _____ has been filed in the above-referenced case by _____.

A hearing has been scheduled for _____ at _____ in _____.

Responses to the motion shall be filed with the Clerk of the Bankruptcy Court and served on parties in interest on or before _____.

A courtesy copy of all responses shall be delivered to chambers with the filing.

Service shall be made as directed below. A certificate of service shall be filed with the Clerk immediately.

Date

United States Bankruptcy Judge

Movant is to complete this notice and file it with the motion for expedited hearing and proposed order granting the substantive relief requested, leaving blank the hearing and response dates. If the Court determines that a hearing is necessary, response and hearing dates will be provided to movant. Movant shall serve a copy of this completed scheduling order and the motion by hand delivery or facsimile on the respondent, trustee, debtor, debtor's attorney, all secured creditors whose interests may be affected by the relief requested, U.S. Trustee and the attorney for any committee. If there is no committee counsel, serve all members of each committee. Movant shall deliver a paper copy of the motion and this notice of hearing to chambers.

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	Chapter 13
	:	
Movant	:	Related to Document No.
	:	
v.	:	
	:	
Respondent(s)	:	

DOMESTIC SUPPORT OBLIGATION CERTIFICATION

I, the debtor named below, state as follows:

I do not have any obligation to pay alimony, maintenance, or support to a spouse, former spouse, child, child's parent, legal guardian, or responsible relative.

OR

I owe the following obligation(s) for alimony, maintenance, or support:

alimony child support other owed to:

Name: _____

Address: _____

Phone: _____

I am current OR in arrears on this obligation.

I HEREBY CERTIFY under penalties of perjury that the information in this certificate, including any additional sheets provided, is true, correct, and complete as of the date provided below.

Signature of Debtor: _____

Type or Print Name of Debtor: _____

Date Certificate is Signed: _____

Chapter 13 Case Number: _____

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	Chapter 13
	:	
Movant	:	Related to Document No.
	:	
v.	:	
	:	
Respondent(s)	:	

**DOMESTIC SUPPORT OBLIGATION
CLAIM HOLDER REPORT**

Debtor Daytime Phone: _____ Evening: _____

Attorney Name: _____

Name of Claim Holder: _____

Address of Claim Holder:

_____	_____	_____
Mailing Address	City/State	ZIP Code

Support Type:

Spousal Support _____ Child Support _____

Both _____

The following information must be completed for each support obligation:

Name of Applicable State Agency Where Claim Holder Resides:

Payment Address:

_____	_____	_____
Mailing Address	City/State	ZIP Code

Account #: _____ Agency Phone #: _____

Monthly Payment Amount: \$ _____ Monthly Due Date: _____

Date Payment Late: _____ Years Remaining: _____

Are ongoing payments being made to the claim holder by Wage Orders? Yes _____ No _____

Is the Debtor currently employed? Yes _____ No _____

If yes, Employer Information:

_____	_____	_____
Mailing Address	City/State	ZIP Code

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re: _____ : Bankruptcy No. _____
 _____ :
 Debtor _____ :
 _____ :
 _____ :
 Movant _____ :
 _____ : Related to Document No. _____
 v. _____ :
 _____ :
 _____ :
 Respondent(s) _____ :

**NOTICE OF FILING OF FINAL ACCOUNT OF TRUSTEE,
OF HEARING ON APPLICATIONS FOR COMPENSATION,
PROPOSED FINAL DISTRIBUTION AND PROPOSED ABANDONMENT OF PROPERTY**

TO THE CREDITORS:

1. **NOTICE IS GIVEN** that the final report and account of the trustee in this case has been filed and a hearing will be held by the court at the following place and time.

Address: _____ Room: _____
 Date and Time: _____

2. The hearing will be held to consider for approval the final report and account of the trustee, to act on applications for compensation, and to transact such other business as may properly come before the court. The objecting party must attend the hearing when an objection is filed. In all other cases, attendance by the debtor and creditors is welcomed but not required. The Court may determine that a hearing is not necessary and enter an Order by default if no objections are filed. Check the Calendar Section of the Court’s Website at www.pawb.uscourts.gov to determine if a default order has been signed and the hearing canceled.

3. The following applications for compensation have been filed:

Applicants	Compensation or Fees Expenses	
_____	\$ _____	\$ _____
Trustee	\$ _____	\$ _____
_____	\$ _____	\$ _____
Attorney for Trustee	\$ _____	\$ _____
_____	\$ _____	\$ _____
Attorney for Debtor	\$ _____	\$ _____
_____	\$ _____	\$ _____
Attorney for Creditors’ Committee	\$ _____	\$ _____
_____	\$ _____	\$ _____
Other (Specify)		

4. The trustee’s account shows total receipts of \$ _____
 and total disbursements of \$ _____
 for a balance on hand of \$ _____

5. In addition to the compensation and fees that may be allowed by the Court, liens and priority claims which must be paid in advance of general creditors have been filed in the total amount of \$_____. (State here only amount of liens and priority claims.)

General unsecured claims have been allowed in the amount of \$_____. The amount to be paid is: _____.

- 6. The debtor has been discharged.
- The debtor has not been discharged.
- The debtor is a corporation.

7. Unless otherwise ordered by the Court, any property not administered by the trustee will be deemed abandoned. The trustee's motion to abandon the following property will be heard and acted upon:

8. Anyone objecting to the final account, final fee applications or the proposed order of distribution shall file the objection with the Clerk and serve a copy on the trustee and, if objecting to fees, serve a copy of the objection on the applicant. All objections shall be filed and served on or before 10 days before the scheduled hearing date.

9. The trustee's final SUMMARY OF PROPOSED DISTRIBUTION is attached.

John J. Horner, Clerk
United States Bankruptcy Court

RESERVED

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	
	:	Bankruptcy No.
Debtor	:	Chapter
	:	Document No.
Movant	:	Hearing Date & Time:
	:	
v.	:	
	:	
Respondent(s)	:	

**CERTIFICATION OF NO OBJECTION REGARDING
(Insert Pleading Title and Document Number)**

The undersigned hereby certifies that, as of the date hereof, no answer, objection or other responsive pleading to the [Application/Motion] filed on _____ has been received. The undersigned further certifies that the Court's docket in this case has been reviewed and no answer, objection or other responsive pleading to the [Application/Motion] appears thereon. Pursuant to the Notice of Hearing, objections to the [Application/Motion] were to be filed and served no later than _____.

It is hereby respectfully requested that the Order attached to the [Application/Motion] be entered by the Court.

Dated: _____

By: _____
Signature

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	
	:	Bankruptcy No.
Debtor	:	Chapter
	:	Document No.
Movant	:	Hearing Date & Time:
	:	
v.	:	
	:	
Respondent(s)	:	

SETTLEMENT AND CERTIFICATION OF COUNSEL REGARDING
(Insert Pleading Title)

The undersigned hereby certifies that agreement has been reached with the respondent(s) regarding the [Application/Motion] filed on _____. (State "None" if no prior Motion or Application.)

The signature requirements of W.PA.LBR 5005-6 have been followed in obtaining the agreement of all parties and is reflected in the attached document.

The undersigned further certifies that:

- An agreed order and a black-lined version showing the changes made to the order originally filed with the court as an attachment to the motion is attached to this Certificate of Counsel. Deletions are signified by a line in the middle of the original text (strikeout) and additions are signified by text in italics. It is respectfully requested that the attached order be entered by the Court.
- No other order has been filed pertaining to the subject matter of this agreement.
- The attached document does not require a proposed order.

Dated: _____

By: _____
Signature

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

RESERVED

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:
Debtor
Movant
v.
Respondent(s)
Bankruptcy No.
Chapter
Document No.
Hearing Date & Time:

DOCUMENT AND LOAN HISTORY ABSTRACT
(COMPLETE A SEPARATE ABSTRACT FOR
THE ORIGINAL TRANSACTION AND EACH ASSIGNMENT)

TYPE OF INSTRUMENT
Mortgage
Assignment
Lease
Other (describe)
Retail Installment Contract
UCC Financing Statement
Promissory Note / Security Agreement

PARTIES
Borrower/Lessee
Lender/Lessor

DATE OF INSTRUMENT # OF PAGES

ESSENTIAL TERMS
Original Principal Balance
Term
Interest Rate
First Payment Due
Payment Amount
Frequency of Payments (weekly, monthly, yearly, etc.)
First Payment Due Date
Last Payment Applied to Installment due on
Amount in Arrears
Total Amount of Claim on Date of Filing of Petition
Total Amount of Claim on Date of Filing of Motion

SECURED (LEASED) PROPERTY DESCRIPTION

Real Property Motor Vehicle Other
Address/Description

Lien Recording

Recorder of Deeds
County/Commonwealth/State
Secretary of State/Commonwealth/State
Bureau of Motor Vehicles (Commonwealth/State)
Other (Describe)
Recording Date
Book & Page/Instrument Number

OTHER ESSENTIAL INFORMATION:

PROOF OF CLAIM FILED WITH CLERK, U.S. BANKRUPTCY COURT (Yes/No)

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	Chapter
	:	
Movant	:	Related to Document No.
	:	
v.	:	
	:	
Respondent (if none, then "No Respondent")	:	

NOTICE REGARDING FILING OF MAILING MATRIX

In accordance with Local Bankruptcy Rule 1007-1(e) I, _____,
counsel for the debtor(s) in the above-captioned case, hereby certify that the following list of creditors'
names and addresses was uploaded through the creditor maintenance option in CM/ECF to the above-
captioned case.

By: _____
Signature

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	
Debtor	:	Chapter
	:	
Movant	:	Related to Document No.
	:	
v.	:	
	:	
Respondent (if none, then "No Respondent")	:	

NOTICE REGARDING MODIFICATION TO MAILING MATRIX

In accordance with Local Bankruptcy Rule 1007-1(f) I, _____,
counsel for the debtor(s) in the above-captioned case, hereby certify that the following list of creditors'
names and addresses was uploaded through the creditor maintenance option in CM/ECF to the above-
captioned case regarding the filing of an amendment to the schedules.

By: _____
Signature

Typed Name

Address

Phone No.

List Bar I.D. and State of Admission

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

APPLICATION FOR ADMISSION TO
BANKRUPTCY MEDIATION PROGRAM REGISTER

General Instructions

(1) Each applicant shall read Local Bankruptcy Rules 9019-2 through 9019-7.

(2) If additional space is needed to respond fully to any item on this application, the response(s) shall be set forth in an attached, signed separate page with an identification of the question number to which it responds.

(3) Attorney applicants shall complete Parts I, II and IV of this Application.

(4) Non-attorney applicants shall complete Parts I, III and IV of this Application.

Part I. ALL APPLICANTS.

Name: _____

Firm: _____

Office Address: _____

Street

City

State

Zip Code

Office Phone: _____

Office Fax: _____

E-Mail: _____

Pa. I.D. or other Professional Association I.D. _____

Part II. ATTORNEY APPLICANTS

1. List each state and federal court in which you currently are licensed to practice law:

Court	Date of Admission
-------	-------------------

2. If you have bankruptcy experience, list the three most recent adversary proceedings or contested matters in which you have served as attorney of record for a party-in-interest from commencement through conclusion (i.e., judgment, order, or stipulation).

Case Title	Case Number	Dates	Representation
------------	-------------	-------	----------------

a.	_____	_____	_____

b.	_____	_____	_____

c.	_____	_____	_____

3. If you have bankruptcy experience, list the most recent three bankruptcy cases in which you have served as the principal attorney of record (without regard to the party represented) from commencement to conclusion.

Case Title	Case Number	Dates	Representation
------------	-------------	-------	----------------

a.	_____	_____	_____

b.	_____	_____	_____

c.	_____	_____	_____

4. If you have participated in mediation or other ADR processes (either as a neutral or in another role), list the three most recent of those matters below.

	Case Title	Case Number	Dates	Representation
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____

Part III. NON-ATTORNEY APPLICANTS

1. If you have participated in mediation or other ADR processes (either as a neutral or in another role), list no more than three of those matters below.

	Case Title	Case Number	Dates	Representation
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____

Part IV. ALL APPLICANTS

1. List any professional licenses you hold (other than bar admission) and include the number of years you have practiced in each profession listed (e.g., accountant, real estate broker, appraiser, engineer).

Profession	Accrediting Organization	Years of Practice
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. List any professional organizations of which you are or were an active member, the length of your membership, and any positions held and/or projects completed.

Organization	No. of Years	Active/Retired	Positions/Projects

3. List any relevant bankruptcy or mediation experience not included in any response above.

4. List any mediation or other alternative dispute resolution training that you have completed and that has qualified for continuing professional education credit or has been approved by a court of competent jurisdiction within the past three years.

Course Title	Trainer/School	Court/Sponsor	CLE Credit Hours	Dates

5. List speaking engagements, panel/seminar participation teaching experience, etc., within the past three years.

6. List any other relevant experience, training, skills, honors, publications, or other information which you would like considered in connection with this application.

7. Have you been removed from any professional organization, or have you resigned from any professional organization while an investigation into allegations of professional misconduct was pending?

Yes _____ No _____

If so, please explain the circumstances of such removal or resignation.

8. Check the city(ies) in which you are willing to conduct mediation conferences:

_____ Pittsburgh

_____ Johnstown

_____ Erie

_____ Other (specify): _____

I hereby certify that I have read Local Bankruptcy Rules 9019-2 through 9019-7, that I meet the qualifications set forth therein for admission to this Court’s Register of mediators, and that I will fully comply with the relevant provisions of this Court’s General Orders, Local Rules, Local Forms, and any modifications thereto relating to mediation. I will immediately contact the Mediation Program Administrator, and any parties for whom I have accepted appointment as a mediator, upon learning I am no longer qualified to serve pursuant to the provisions of Local Bankruptcy Rule 9019-3.

If I am applying for appointment as an attorney mediator, I certify that I am a member in good standing of the state and federal bar(s) listed above. If I am applying for appointment as a non-attorney mediator, I certify that I am a member in good standing of my profession.

I consent to disclosure of the information contained in this Application to Court personnel and to the parties and their representatives whose matters have been referred to the Bankruptcy Mediation Program of this Court.

I declare under penalty of perjury that the information contained in this Application is true and correct.

Executed on _____, _____ at _____, _____.
(date) (year) (city) (state)

By typing my name in the box below, it is my intent to affix my signature to this application as though it were my handwritten signature. I understand and accept that this digital signature shall have the full force and effect of a handwritten signature.

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In re:)	Bankruptcy No. _____
_____)	
Debtor)	
_____)	
)	Motion No. _____
_____)	
Plaintiff/Movant)	Adversary No. _____
)	
vs.)	
)	
_____)	
Defendant/Respondent)	
_____)	

MEDIATOR’S CERTIFICATE OF COMPLETION OF MEDIATION CONFERENCE

1. I hereby certify that pursuant to an order of assignment of this Court to the Bankruptcy Mediation Program dated _____, a Mediation Program Conference was held on _____/was not held.
(list all date(s) on which conference was held)

2. A settlement/resolution of this matter was ____/was not ____ reached.

Dated: _____ Mediator: _____
Signature

Type or print:

Name: _____

Address: _____

Telephone: _____

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In re:) Bankruptcy No. _____
)
_____)
Debtor)
)
_____)
) Motion No. _____
)
_____)
Plaintiff/Movant) Adversary No. _____
)
)
vs.)
)
_____) Note: Local Bankruptcy Forms 33 and 34 should
) not be filed on the case docket. These forms
Defendant/Respondent) should be delivered to the Mediation Program
) Administrator.

REPORT OF MEDIATION PROGRAM CONFERENCE

I, _____, mediator for the Bankruptcy Mediation Program, state:

1. A Mediation Program conference was held on _____, _____ and (if applicable) on the following continued date(s): _____ (attach attendance form[s]).

2. I ___ did/___ did not receive a fee for this mediation.

3. The rules governing the conference were _____/were not _____ complied with. If not, explain below:

4. A settlement/resolution of this matter was ___/was not ___ reached.

5. If a settlement/resolution was reached, (plaintiff/defendant/other party) _____ prepared the written stipulation for settlement.

6. Prior to the preparation of a final written agreement, the parties choose to put the agreement on the Court record. Yes ___ No ___.

7. I spent _____ hours in preparing for and scheduling the conference(s).

8. I spent _____ hours attending the conference(s).

9. I spent _____ hours on postconference matters.

10. Comments/Suggestions (use additional sheets if necessary):

Dated: _____

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

MEDIATOR'S SURVEY

We need your help to evaluate the effectiveness of the Mediation Program. Please complete this form and return it to:

**The Honorable Judith K. Fitzgerald, Mediation Program Administrator,
to the attention of John Horner, Clerk of Court
5414 U.S. Steel Tower
600 Grant Street
Pittsburgh, PA 15219**

This information will be used solely for the purpose of evaluating the Mediation Program.

1. Case Name: _____
Case No. _____

2. Chapter: _____ 7 _____ 11 _____ 12 _____ 13

3. Adv. Name: _____
Adv. No. _____

No. Related to Document No. _____

4. When were you appointed as mediator? _____

5. When did the mediation take place? _____

6. Where did you meet?
 Mediator's Office
 Courthouse
 Office of a Party
 Office of a Party's Attorney
 Other (specify) _____

7. How long was the mediation?
 less than 1 hour
 1-2 hours
 3-4 hours
 one day
 more than one day (specify number of days) _____

8. The dispute that you mediated was:
 totally resolved (subject to Court approval)
 partially resolved (certain issues were settled)
 partially resolved (certain issues were narrowed for litigation)
 not resolved

9. In your opinion, did each party have a representative with full settlement authority at the mediation conference? ____yes ____no

10. Did the parties who attended the mediation conference participate in good faith? ____ yes ____ no

11. What was the type of proceeding?
____ non-dischargeability (specify basis) §523(a)(____)
____ objection to claim
____ preference
____ fraudulent transfer
____ turnover
____ administrative expense
____ valuation
____ other (specify) _____

12. How much money was claimed in the dispute?
____ under \$1,000
____ \$1,000 to \$5,000
____ \$5,000 to \$10,000
____ \$10,000 to \$50,000
____ \$50,000 to \$100,000
____ \$100,000 to \$500,000
____ over \$500,000
____ nonmonetary issue (specify) _____

13. The plaintiff or movant was a[n]:
____ trustee
____ individual
____ corporation
____ partnership
____ Internal Revenue Service
____ other (specify) _____

14. The defendant or respondent was a[n]
____ trustee
____ individual
____ corporation
____ partnership
____ Internal Revenue Service
____ other (specify) _____

15. What did you dislike about the mediation conference?

16. What did you like about the mediation conference?

17. How can the Mediation Program be improved?

18. Please include below any additional comments regarding the mediation conference in which you participated or regarding the Court's Mediation Program

Dated: _____

_____ Mediator

Please type or print name

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	:	Bankruptcy No.
	:	Adversary Proceeding No.
Debtor	:	
	:	Chapter
	:	
Movant	:	
	:	Related to Document No.
v.	:	
	:	
	:	
Respondent (if none, then "No Respondent")	:	

NOTICE OF INTENT TO REQUEST REDACTION

WHEREAS, on [INSERT DATE] a transcript was filed in the above-captioned case at Document No. [INSERT DOCUMENT NUMBER],

NOTICE IS HEREBY GIVEN THAT:

Pursuant to W.PA.LBR 5007-2 and Rule 9037 of the *Federal Rules of Bankruptcy Procedure*, I have reviewed the above-referenced transcript and intend to serve upon the transcriber, [INSERT NAME OF TRANSCRIBER], and all parties in interest, within twenty-one (21) days after [INSERT THE ABOVE-REFERENCED DATE OF FILING], a detailed request to redact information from that transcript.

I understand that the above-referenced transcriber has until thirty-one (31) days after [INSERT THE ABOVE-REFERENCED DATE OF FILING] to deliver a redacted version of the transcript to the Court.

I HEREBY CERTIFY THAT:

On [INSERT DATE] I filed a copy of this *Notice* with the Court and served a copy on: [INSERT RECIPIENTS OF ELECTRONIC SERVICE] electronically using the CM/ECF system and [INSERT RECIPIENTS (INCLUDING TRANSCRIBER) OF REGULAR MAIL SERVICE] using the United States Postal Service.

Date: _____

Signed: _____

Name of Filer - Typed

Address

Phone No.

Bar I.D. and State of Admission

Name of Party Represented

Page(s)	Line(s)	Identifier as is	Identifier as redacted

Date: _____

Signed: _____

Name of Filer - Typed

Address

Phone No.

Bar I.D. and State of Admission

Name of Party Represented

This form must be served on the transcriber identified above and all parties in interest; it should not be filed with the Court.