CHAPTER 13 ATTORNEY CHECKLIST

Gretchen D. Holland, Chapter 13 Trustee

Case No.: Name of Debtor 1:_____

Attorney: _____ Name of Debtor 2: _____

PLEASE COMPLETE THIS CHECKLIST AND PROVIDE ALL INFORMATION AND DOCUMENTS TO THE TRUSTEE AS SOON AS THE CASE IS FILED.

FAILURE TO PROVIDE ALL REQUESTED AND/OR REQUIRED INFORMATION AT LEAST SEVEN (7) DAYS PRIOR TO THE SCHEDULED 341 MEETING WILL RESULT IN DELAYS IN GETTING THE CASE CONFIRMED.

- THE TRUSTEE'S OFFICE NO LONGER ACCEPTS DOCUMENTS SENT AS EMAIL ATTACHMENTS. Debtor's Attorneys are now required to submit documents to the Trustee's office using the secure Document Upload Portal. For information on registration and usage, please visit <u>https://upstate13.com/attorneys.aspx</u> and view the information under the Document Upload Portal heading.
- Do not file with the Court.
- Do not mail originals of any of these documents as they are subject to being destroyed.

PLEASE IGNORE ANY SECTION THAT IS NOT APPLICABLE TO THE SUBJECT CASE.

1. Real Property

Please submit separately through the Document Upload Portal the most recent tax appraisal for each parcel of real estate (or mobile home) in which the debtor has an interest, if not already attached to Schedule A/B. Please also provide the date of purchase and purchase price for each parcel, if not already included on Schedule A/B.

2. Income

Please provide a copy of the four (4) most recent pay stubs for debtor 1 and debtor 2 (or the non-filing spouse/partner) <u>if not already filed on CM/ECF</u>. Do not send us the same paystubs already filed.

	Debtor 1 is paid:				
_	Once per week	Once every two weeks			
-	Twice per month on the following da	ates:			
_	Once per month	Other:			
[Debtor 2 (or the non-filing spouse/partne	er if not a joint case) is paid:			
_	Once per week	Once every two weeks			
_	Twice per month on the following dates:				
-	Once per month	Other:			
3. <u>Retir</u>	rement accounts				
If del	btor contributes to a retirement account, ha	ve contributions started or increased within the last year?			
١	NoYes; explain why:				

For each retirement account loan being repaid, state the payoff balance owed: \$ ___

4. Household Size

If the debtor provides support (other than child support) to someone that does not reside with the debtor, please provide the supported person's relation to the debtor, the amount of support provided each month, when the support began, how long the support is expected to continue, and the supported person's monthly income and monthly expenses.

5. Tax Returns

Please upload separately a copy of the <u>most recent</u>, final, signed, and filed tax return (or transcript). Please provide the federal return and all state returns. Please be sure all pages and attachments are included, are in the correct order, and are facing the same direction.

If the debtor is not required to file a tax return, please provide an affidavit <u>that includes the years the debtor</u> was not required to file, and why no return was required.

6. Self-Employment

If debtor 1 or debtor 2 (or non-filing spouse/partner if not a joint case) is self-employed, please provide all of the following:

- Fully completed business questionnaire: <u>https://upstate13.com/Forms/Business_questionnaire_0210.pdf</u>
- Tax returns (if filed separately from the personal return)
- Profit and Loss Statements for the 6 months prior to filing and the most current complete month: <u>https://upstate13.com/Forms/Profit_and_Loss_Statement_0210.pdf</u>
- <u>OR</u> If the debtor does not maintain Profit and Loss Statements, please submit a completed Projected Business Budget instead: <u>https://upstate13.com/Forms/Projected_Business_Budget_Fillable_2017.pdf</u>

7. Independent Contractor (1099)

If the debtor is not self-employed but solely a 1099 independent contractor, provide some proof of income (copies of checks, bank statements, profit and loss, etc.).

8. Non-Filing Spouse/Partner Expenses and Debt Payments

Provide an itemization of all monthly expenses and debt payments of the debtor's non-filing spouse/partner:

Creditor name and type of debt	Balance owed	Minimum monthly payment	Collateral (if any)	Expected payoff date

9. Expenses Claimed Higher than Standards

Please provide an <u>itemization</u> of any variation from the standards in an above-median case (e.g., health care expenses in excess of the allowable standard), or unusually high expenses in a below-median case. Please also include a written statement of the reason for the additional expense or variance.

10. Charitable Contributions

If the debtor's filed budget includes an expense for charitable contributions that is 5% or more of the debtor's gross income, please provide a statement from the church for the current and previous year to support the claimed expense.

11. Domestic Support Obligations

Provide the name, address and telephone number for each person to whom the debtor owes a domestic support obligation (DSO):

Provide the following information for each child for whom the debtor pays child support:

Age of child (list each one on separate	Amount paid	How often paid	At what age will	Is support
line)		(weekly, monthly, etc.)	support end?	court-ordered?

12. Debtor Authorization Form

Please submit a signed Debtor Authorization Form: https://upstate13.com/Forms/Debtor Authorization Form.pdf

13. Wage Order Request

If the debtor wants plan payments to be made by automatic payroll deduction, please complete and submit this wage order authorization form: <u>https://upstate13.com/Forms/wage_order_authorization_0210.pdf</u>

14. If the plan proposes to pay secured creditors an interest rate lower than what is required by Local Rules or Operating Order, please upload separately a copy of the retail installment contract showing the contract rate of interest.

I certify that in preparation of the bankruptcy schedules in this case, my office has reviewed the information provided to the trustee.

Signature of Attorney for Debtor