

# 341 STATUS SHEET

Case Name: DEBTOR JANE

Date : 3/31/2006

Case Num: 00-00000

Attorney: DOE

341 Date: 3/21/2000

PCA: CWB

Obj	Yes	No	
-----	-----	----	--

### Documents:

- |     |  |     |  |
|-----|--|-----|--|
| X   |  |     | 1) Is the file complete? Please check the document received.   |
| X   |  |     | Plan   |
| X   |  |     | Schedules  |
| X   |  |     | Certificate that Debtor Rec'd §342(b) Notice   |
| X   |  |     | Last Federal Income Tax Return   |
| X   |  |     | Statement of CMI – B22 Official Form   |
| X   |  |     | Certificate from Approved Credit Counseling  |
| X   |  |     | Bankruptcy Petition Cover Sheet  |
| X   |  |     | Petition   |
| X   |  |     | 2016(b)  |
| X   |  |     | Matrix   |
| X   |  |     | SOFA   |
| X   |  |     | Payment Order  |
| X   |  |     | 1a) 60 days of pay stubs sent to Trustee 7 days before 341 Hearing date per LBR 1007(i)?                                   |
| X   |  | X   | 1b) If Part 1 of Cover Sheet is marked "Yes",<br>is Part 2 filled out completely listing companion cases per LBR 1071- (i) |
| X   |  |     | 1c) If Part 1 of Cover Sheet is marked "Yes", Is Part 3 of Cover Sheet marked Yes or No?                                   |
| N/A |  | N/A | 2) Is Pro se declaration document filed? 1007-1-1(f)<br>OR Is Declaration of Non-Attorney Preparer and Notice Filed?       |

### Schedules and CMI Form Information:

- |     |  |     |  |
|-----|--|-----|--|
| X   |  |     | 3) Is Debtor without self-employment?  |
| N/A |  | N/A | 3a) -----  |
| N/A |  | N/A | 3b) Does the Debtor incur trade credit? (PCA: After hearing, note computer system)                             |
|     |  |     | Business Budget  |
|     |  |     | Profit & Loss  |
|     |  |     | Statement Business Trade Credit  |
| N/A |  | N/A | 3c) If trade credit incurred, is it disclosed in the Plan's General Provision, Section I? 3015-(a)(8)          |
| X   |  |     | 4) Is employment information on Schedule I complete? Includes income for spouse                                |
| X   |  |     | 5) Does Debtor meet the Debt Limitations?  |
| X   |  |     | 6) Are Exemptions correct? (Complete and attach Exemptions Checklist)  |
| X   |  |     | 6a) Federal  |
|     |  |     | State, Please List:  |
| X   |  |     | 7) CMI/Disposable Income Official Form accurate & complete?<br>(if incomplete/inaccurate, explain in comments) |
| X   |  |     | 7a) Below Median   |
|     |  |     | Above Median   |
|     |  |     | Commit Yrs (3 or 5): 3   |

### Plan Information

- |   |  |   |  |
|---|--|---|--|
|   |  | X | 8) Is this an exact duplication of the District's Model Plan (Current ver, without modifications)?                   |
|   |  | X | 8a) Changes out of ordinary? List pg & paragraph w/ changes:   |
| X |  |   | 9) Attorney Fees (As listed on Attorney Fee Statement 2016(b)?):   |
|   |  |   | Paid: \$100.00   |
|   |  |   | + Unpaid: \$2,400.00   |
|   |  |   | =Total: \$2,500.00   |
| X |  |   | 9a) Does the information on the attorney fee disclosure statement<br>2016(b) match information in Class 1c. Of plan? |
|   |  | X | 10) Unsecured creditors provided for in Plan?  |
|   |  |   | Pot \$0.00 = ( 0% ) Plan Len: 60 MONTHS  |
|   |  |   | 0% - OR -  |
|   |  |   | 0 %  |
|   |  |   | 0 %  |
|   |  |   | Trustee Req:   |

<input checked="" type="checkbox"/>	<input type="checkbox"/>	12)	Does Plan comply with LBR 3015-1 (Check which are valid):	<input type="checkbox"/>	<input checked="" type="checkbox"/>	LQA
	<input type="checkbox"/>		<input type="checkbox"/> Assumes\Rejects Executory Contracts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> States % rate for Secured debt			
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> Gives time to cure for Arrearages			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	12a)	Provides for automatic Escrow adjustment? 3015-1(a) & 3001-2?			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	13)	Are all payments through the Trustee?			<b>Please list the creditors Below:</b>
			<b>EASTSIDE MOTOR SALES</b>			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	14)	Are all Direct pays accounted for on Schedules I or J or by third party?			
<input type="checkbox"/>	<input type="checkbox"/>	15)	Are all Adequate Protection Payments to be paid by the Trustee?			
<input type="checkbox"/>	<input type="checkbox"/>	16)	Are the un-assigned DSO creditor(s) being paid in full through the plan?			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	17)	Are all secured and priority creditors listed in schedules treated in plan?			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	18)	Are all creditors treated in plan listed in schedules?			
<input type="checkbox"/>	<input type="checkbox"/>	19)	Any class-5 debts incurred in less than 2.5 yrs of Filing crammed?			
<input type="checkbox"/>	<input type="checkbox"/>	19a)	Is the collateral for the personal use of the Debtor?			
<input type="checkbox"/>	<input type="checkbox"/>	20)	Have all Tax Returns been filed for last 4 years - §1308?			
			What years or agency not filed?:			

**Plan Calculation Information**

Proposed:	\$	817.00	per month
Length:		60	months
Unsecured %:		0%	
Feasible?:		Yes	
Div to Unsec higher?		Yes	3%
Completes early?		Yes	38 mo

If not feasible (under fund or plan terms)

RUNS Mths:	0	months
RUNS %:	0%	
Needs:	\$ -	per month
or Extend mths	N/A	
	Ttl	Mths

**(Attach Plan Calculation Report)**

**Comments**

A)	ATTY FEES HELD
B)	NO SIGNATURES ON PLAN 0%
C)	0% TO UNSECURED CR (WKST UNSEC AMT \$1113672)
D)	UNSECURED PORTION OF CL5 CR EASTSIDE MOTORS (PD DR DIR) **NTIP
E)	SCH I DR 2 INCOME DISABILITY \$688 (REQ VERIFICATION)
F)	SCH I DR1 2D JOB INCOME \$500 (REQ VERIFICATION)
G)	SCH B AUTO - NO AUTO INS SCH J
H)	SCH J HEAT/ELEC \$220 CHARITABLE CONT \$200/ SOFA #7
I)	SOFA #5 SOFA #9 NO COST FOR CREDIT COUNSELING (?)
J)	SOFA #1 DR 1 INCOME 2005<2004


**Hearing Officer to Mark**

<table border="0"> <tr><td>Yes</td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	Yes	No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p><b>Debtor Attorney Present</b></p> <p><b>Debtor(s) Present</b></p> <p><b>File MTD180</b></p> <p><b>Request MTD from Legal Assistant</b></p> <p><input type="checkbox"/> <b>SND TO LGL - DSO § 1302 NOTICE REQ'D</b></p> <p><input type="checkbox"/> <b>SND TO LGL FOR OBJs</b></p>	<p><input type="checkbox"/> <b>341 Held</b></p> <p><input type="checkbox"/> <b>341 Not Held</b></p> <p><input type="checkbox"/> <b>341 Continued</b></p> <p><b>Continued Date:</b> <input type="text"/></p> <p><b>Continued Time:</b> <input type="text"/></p> <p>[ ] TLT [ ] KJS [ ] MRS</p> <p>[ ] TF [ ] JB</p>
Yes	No															
<input type="checkbox"/>	<input type="checkbox"/>															
<input type="checkbox"/>	<input type="checkbox"/>															
<input type="checkbox"/>	<input type="checkbox"/>															
<input type="checkbox"/>	<input type="checkbox"/>															
<input type="checkbox"/>	<input type="checkbox"/>															
<input type="checkbox"/>	<input type="checkbox"/>															

**PCA to Mark**

<input checked="" type="checkbox"/>	Pay Stubs Received
<input checked="" type="checkbox"/>	Last 2 years Tax Returns Received
<input checked="" type="checkbox"/>	Completed Income Verification Form

<table border="0"> <tr><td>Yes</td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	Yes	No	<input type="checkbox"/>	<input type="checkbox"/>	<p>Notice of Special Appearance and 2016(b) for Stand-In Attorney?</p>	<p>Name of Stand-In Attorney:</p> <input type="text"/>
Yes	No					
<input type="checkbox"/>	<input type="checkbox"/>					