

**Fill in this information to identify your case:**

Debtor 1 JOE DOE SMITH  
Full Name (First, Middle, Last)

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) Full Name (First, Middle, Last)

United States Bankruptcy Court for the: Northern District of Mississippi

Case number 17-12345-JDW  
(If known)

Check if this is an amended plan, and list below the sections of the plan that have been changed.

3.1(c)

# Chapter 13 Plan and Motions for Valuation and Lien Avoidance

## Part 1: Notices

**To Debtors:** This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances or that it is permissible in your judicial district. Plans that do not comply with local rules and judicial rulings may not be confirmable. The treatment of ALL secured and priority debts must be provided for in this plan.

*In the following notice to creditors, you must check each box that applies.*

**To Creditors:** Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated.

You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one.

**If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file an objection to confirmation on or before the objection deadline announced in Part 9 of the Notice of Chapter 13 Bankruptcy Case (Official Form 309I). The Bankruptcy Court may confirm this plan without further notice if no objection to confirmation is filed. See Bankruptcy Rule 3015.**

The plan does not allow claims. Creditors must file a proof of claim to be paid under any plan that may be confirmed.

The following matters may be of particular importance. **Debtors must check one box on each line to state whether or not the plan includes each of the following items. If an item is checked as "Not Included" or if both boxes are checked, the provision will be ineffective if set out later in the plan.**

1.1	A limit on the amount of a secured claim, set out in Section 3.2, which may result in a partial payment or no payment at all to the secured creditor	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not included
1.2	Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in Section 3.4	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not included
1.3	Nonstandard provisions, set out in Part 8	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not included

2.1 Length of Plan.

The plan period shall be for a period of 60 months, not to be less than 36 months or less than 60 months for above median income debtor(s). If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.

2.2 Debtor(s) will make regular payments to the trustee as follows:

Debtor shall pay \$ 2,600.00 ( [x] monthly, [ ] semi-monthly, [ ] weekly, or [ ] bi-weekly ) to the chapter 13 trustee. Unless otherwise ordered by the court, an Order directing payment shall be issued to the debtor's employer at the following address:

ABC Manufacturing Corp.
321 Industrial Road
Oxford, MS 38655

Joint Debtor shall pay \$ ( [ ] monthly, [ ] semi-monthly, [ ] weekly, or [ ] bi-weekly ) to the chapter 13 trustee. Unless otherwise ordered by the court, an Order directing payment shall be issued to the joint debtor's employer at the following address:

2.3 Income tax returns/refunds.

Check all that apply .

- [x] Debtor(s) will retain any exempt income tax refunds received during the plan term.
[ ] Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all non-exempt income tax refunds received during the plan term.
[ ] Debtor(s) will treat income tax refunds as follows:

2.4 Additional payments.

Check one.

- [x] None. If "None" is checked, the rest of § 2.4 need not be completed or reproduced.
[ ] Debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source, estimated amount, and date of each anticipated payment.

3.1 Mortgages. (Except mortgages to be crammed down under 11 U.S.C. § 1322(c)(2) and identified in § 3.2 herein.)

Check all that apply.

- [ ] None. If "None" is checked, the rest of § 3.1 need not be completed or reproduced.

3.1(a) [x] Principal Residence Mortgages: All long term secured debt which is to be maintained and cured under the plan pursuant to 11 U.S.C. § 1322(b)(5) shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed by the mortgage creditor, subject to the start date for the continuing monthly mortgage payment proposed herein.

1<sup>st</sup> Mtg pmts to OCWEN LOAN SERVICING

Beginning FEBRUARY 2018 @ \$ 1,000.00  Plan  Direct. Includes escrow  Yes  No

1<sup>st</sup> Mtg arrears to OCWEN LOAN SERVICING Through JANUARY 2018 \$ 5,000.00

**3.1(b)**  **Non-Principal Residence Mortgages:** All long term secured debt which is to be maintained and cured under the plan pursuant to 11 U.S.C. § 1322(b)(5) shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed by the mortgage creditor, subject to the start date for the continuing monthly mortgage payment proposed herein.

Property 1 address: \_\_\_\_\_

Mtg pmts to \_\_\_\_\_

Beginning \_\_\_\_\_ @ \$ \_\_\_\_\_  Plan  Direct. Includes escrow  Yes  No

Property 1: Mtg arrears to \_\_\_\_\_ Through \_\_\_\_\_ \$ \_\_\_\_\_

**3.1(c)**  **Mortgage claims to be paid in full over the plan term:** Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed by the mortgage creditor.

Creditor: WELLS FARGO BANK Approx. amt. due: \$20,000.00 Int. Rate\*: 6.0

Property Address: 456 MAIN STREET

Principle Balance to be paid with interest at the rate above: \$19,000.00  
(as stated in Part 2 of the Mortgage Proof of Claim Attachment)

Portion of claim to be paid without interest: \$ 1,000.00  
(Equal to Total Debt less Principal Balance)

Special claim for taxes/insurance: \$ 100.00 /month, beginning FEBRUARY 2018  
(as stated in Part 4 of the Mortgage Proof of Claim Attachment)

\*Unless otherwise ordered by the court, the interest rate shall be the current Till rate in this District.

*Insert additional claims as needed.*

**3.2 Motion for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one.**

**None.** If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

*The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.*

Pursuant to Bankruptcy Rule 3012, for purposes of 11 U.S.C. § 506(a) and § 1325(a)(5) and for purposes of determination of the amounts to be distributed to holders of secured claims, debtor(s) hereby move(s) the court to value the collateral described below at the lesser of any value set forth below or any value set forth in the proof of claim. Any objection to valuation shall be filed on or before the objection deadline announced in Part 9 of the Notice of Chapter 13 Bankruptcy Case (Official Form 309I).

The portion of any allowed claim that exceeds the amount of the secured claim will be treated as an unsecured claim under Part 5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the amount of the creditor's total claim listed on the proof of claim controls over any contrary amounts listed in this paragraph.

Name of creditor	Estimated amount of creditor's total claim #	Collateral	Value of collateral	Amount of secured claim	Interest rate*
MISS. DEPT. REVENUE	\$2,000	NON-EXEMPT PROPERTY	\$3,500	\$2,000	SEE PART 8.1
FORD MOTOR CREDIT	\$8,000	2010 FORD F150	\$6,000	\$6,000	6%
DITECH	\$9,000	MOBILE HOME	\$5,500	\$5,500	6%
FIRST HERITAGE CREDIT	\$2,000	MAC COMPUTER	\$500	\$500	6%
LAFAYETTE COUNTY CHANCERY CLERK	\$1,500	123 HOME ST., OXFORD, MS	\$150,000	\$1,500	SEE PART 8.1
HOME PLACE HOA, INC.	\$200	123 HOME ST., OXFORD, MS	\$150,000	\$200	SEE PART 8.1

Insert additional claims as needed.

#For mobile homes and real estate identified in § 3.2: Special Claim for taxes/insurance:

Name of creditor	Collateral	Amount per month	Beginning
DITECH	MOBILE HOME	\$120	JANUARY 2018

\*Unless otherwise ordered by the court, the interest rate shall be the current *Till* rate in this District.

For vehicles identified in § 3.2: The current mileage is 175,000

**3.3 Secured claims excluded from 11 U.S.C. § 506.**

Check one.

**None.** If "None" is checked, the rest of § 3.3 need not be completed or reproduced.

The claims listed below were either:

- (1) incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of the debtor(s), or
- (2) incurred within 1 year of the petition date and secured by a purchase money security interest in any other thing of value.

These claims will be paid in full under the plan with interest at the rate stated below. Unless otherwise ordered by the court, the claim amount stated on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) controls over any contrary amount listed below. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling.

Name of creditor	Collateral	Amount of claim	Interest rate*
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Name of creditor	Collateral	Amount of claim	Interest rate*
TOYOTA FINANCIAL	2016 CAMRY	25,000.00	6.0

\*Unless otherwise ordered by the court, the interest rate shall be the current *Till* rate in this District.

*Insert additional claims as needed.*

**3.4 Motion to avoid lien pursuant to 11 U.S.C. § 522.**

*Check one.*

**None.** If "None" is checked, the rest of § 3.4 need not be completed or reproduced.

**The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.**

The judicial liens or nonpossessory, nonpurchase money security interests securing the claims listed below impair exemptions to which the debtor(s) would have been entitled under 11 U.S.C. § 522(b). Unless otherwise ordered by the court, a judicial lien or security interest securing a claim listed below will be avoided to the extent that it impairs such exemptions upon entry of the order confirming the plan unless the creditor files an objection on or before the objection deadline announced in Part 9 of the Notice of Chapter 13 Bankruptcy Case (Official Form 309I). Debtor(s) hereby move(s) the court to find the amount of the judicial lien or security interest that is avoided will be treated as an unsecured claim in Part 5 to the extent allowed. The amount, if any, of the judicial lien or security interest that is not avoided will be paid in full as a secured claim under the plan. See 11 U.S.C. § 522(f) and Bankruptcy Rule 4003(d). If more than one lien is to be avoided, provide the information separately for each lien.

Name of creditor	Property subject to lien	Lien amount to be avoided	Secured amount remaining	Type of lien	Lien identification (county, court, judgment date, date of lien recording, county, court, book and page number)
FIRST HERITAGE CREDIT	CANNON CAMERA (\$25), PUSH MOWER (\$150), 42" TV (\$50), 36" TV (\$50), ELECTRIC GRILL (\$50)	\$325	\$1675	Non-PMSI	UCC
TOWER LOAN	DEEP FREEZER	\$150.00	\$1,350	Non-PMSI	UCC
REPUBLIC FINANCE	MISC. HOUSEHOLD & YARD TOOLS (\$100), SMITH & WESSON REVOLVER (\$100), STEREO (\$25) 42" TV (\$50), DVD PLAYER (\$50)	\$325	\$2,675	Non-PMSI	UCC

*Insert additional claims as needed.*

**3.5 Surrender of collateral.**

*Check one.*

**None.** If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

The debtor(s) elect to surrender to each creditor listed below the collateral that secures the creditor's claim. The debtor(s) request that upon confirmation of this plan the stay under 11 U.S.C. § 362(a) be terminated as to the collateral only and that the stay under § 1301 be terminated in all respects. Any allowed unsecured claim resulting from the disposition of the collateral will be treated in Part 5 below.

Name of creditor	Collateral
HONDA FINANCE	HONDA RANCHER ATV
TOWER LOAN	DELL LAPTOP, PLAYSTATION & GAMES

Name of creditor	Collateral
FIRST HERITAGE CREDIT	ELECTRIC GRILL, 36" TV, CAMERA

*Insert additional claims as needed.*

**Part 4:** Treatment of Fees and Priority Claims

**4.1 General**

Trustee's fees and all allowed priority claims, including domestic support obligations other than those treated in § 4.5, will be paid in full without postpetition interest.

**4.2 Trustee's fees**

Trustee's fees are governed by statute and may change during the course of the case.

**4.3 Attorney's fees**

No look fee: \$ 3,400.00 \_\_\_\_\_.

Total attorney fee charged: \$ 3,400.00 \_\_\_\_\_.

Attorney fee previously paid: \$ 400.00 \_\_\_\_\_.

Attorney fee to be paid in plan per confirmation order: \$ 3,000.00 \_\_\_\_\_.

Hourly fee: \$ \_\_\_\_\_ (Subject to approval of Fee Application.)

**4.4 Priority claims other than attorney's fees and those treated in § 4.5.**

*Check one.*

**None.** *If "None" is checked, the rest of § 4.4 need not be completed or reproduced.*

Internal Revenue Service \$ 2,000.00 \_\_\_\_\_.

Mississippi Dept. of Revenue \$ \_\_\_\_\_.

Other \_\_\_\_\_  
\$ \_\_\_\_\_.

**4.5 Domestic support obligations.**

**None.** *If "None" is checked, the rest of § 4.5 need not be completed or reproduced.*

DUE TO: MISS. DEPARTMENT OF HUMAN SERVICES

POST PETITION OBLIGATION: In the amount of \$ 150.00 \_\_\_\_\_ per month beginning DECEMBER 2017

To be paid  direct,  through payroll deduction, or  through the plan.

PRE-PETITION ARREARAGE: In the total amount of \$ 2,000.00 through NOVEMBER 2017 which shall be paid in full over the plan term, unless stated otherwise: \_\_\_\_\_

To be paid  direct,  through payroll deduction, or  through the plan.

*Insert additional claims as needed.*

**Part 5:** Treatment of Nonpriority Unsecured Claims

**5.1 Nonpriority unsecured claims not separately classified.**

Allowed nonpriority unsecured claims that are not separately classified will be paid, pro rata. If more than one option is checked, the option providing the largest payment will be effective. *Check all that apply.*

The sum of \$ 4,000.00 .

\_\_\_\_\_ % of the total amount of these claims, an estimated payment of \$ \_\_\_\_\_ .

The funds remaining after disbursements have been made to all other creditors provided for in this plan.

If the estate of the debtor(s) were liquidated under chapter 7, nonpriority unsecured claims would be paid approximately \$ 0.00 .  
Regardless of the options checked above, payments on allowed nonpriority unsecured claims will be made in at least this amount.

**5.2 Other separately classified nonpriority unsecured claims (special claimants). Check one.**

**None.** *If "None" is checked, the rest of § 5.2 need not be completed or reproduced.*

The nonpriority unsecured allowed claims listed below are separately classified and will be treated as follows

Name of creditor	Basis for separate classification and treatment	Approximate amount owed	Proposed treatment
U.S. DEPARTMENT OF EDUCATION	LOAN IN DEFERMENT	\$25,000	NO DISTRIBUTION
CITY OF OXFORD	RESTITUTION	\$1,000	PAY DIRECT

**Part 6:** Executory Contracts and Unexpired Leases

**6.1 The executory contracts and unexpired leases listed below are assumed and will be treated as specified. All other executory contracts and unexpired leases are rejected. Check one.**

**None.** *If "None" is checked, the rest of § 6.1 need not be completed or reproduced.*

**Assumed items.** Current installment payments will be disbursed either by the trustee or directly by the debtor(s), as specified below, subject to any contrary court order or rule. Arrearage payments will be disbursed by the trustee. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid	Treatment of arrearage
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Name of creditor	Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid	Treatment of arrearage
RENT-A-CENTER	SOFA, RECLINER, END TABLES, 60" TV	\$ 100.00	\$ 200	PAID BY TRUSTEE OVER PLAN TERM

Disbursed by:  
 Trustee  
 Debtor(s)

Insert additional claims as needed.

**Part 7:** Vesting of Property of the Estate

**7.1 Property of the estate will vest in the debtor(s) upon entry of discharge.**

**Part 8:** Nonstandard Plan Provisions

**8.1 Check "None" or List Nonstandard Plan Provisions**

**None.** If "None" is checked, the rest of Part 8 need not be completed or reproduced.

Under Bankruptcy Rule 3015(c), nonstandard provisions must be set forth below. A nonstandard provision is a provision not otherwise included in the Official Form or deviating from it. Nonstandard provisions set out elsewhere in this plan are ineffective.

**The following plan provisions will be effective only if there is a check in the box "Included" in § 1.3.**

1. Claim of MDOR shall be paid interest at the statutory rate of 8.4%.
2. Franklin Credit Management has a secured claim of approximately \$50,000 secured by a second deed of trust on the primary residence at 123 Home St., Oxford, MS. The Debtor will commence an Adversary Proceeding to strip lien as there is no equity to secure the claim. The Adversary Proceeding shall be filed at the later of 90 days following confirmation or the filing of the creditor's Proof of Claim. If the Adversary Proceeding is not timely filed, the claim of Franklin Credit Management shall be paid as filed.
3. Lafayette County Chancery Clerk has a secured claim in the approximate amount of \$1,500 for 2016 ad valorem taxes. The Debtor shall pay this indebtedness directly.
4. Home Place HOA, Inc. has a secured claim in the approximate amount of \$200 for 2016 HOA dues. This claim shall be paid through the plan at 0% interest.



**9.1 Signatures of Debtor(s) and Debtor(s)' Attorney**

The Debtor(s) and attorney for the Debtor(s), if any, must sign below. If the Debtor(s) do not have an attorney, the Debtor(s) must provide their complete address and telephone number.

**X** /s/ JOE DOE SMITH  
Signature of Debtor 1

Executed on 12/18/2017  
MM / DD / YYYY

123 Home Street  
Address Line 1

Address Line 2

Oxford, MS 38655  
City, State, and Zip Code

(662) 123-4567  
Telephone Number

**X** \_\_\_\_\_  
Signature of Debtor 2

Executed on \_\_\_\_\_  
MM / DD / YYYY

\_\_\_\_\_  
Address Line 1

\_\_\_\_\_  
Address Line 2

\_\_\_\_\_  
City, State, and Zip Code

\_\_\_\_\_  
Telephone Number

**X** /s/ JOHN Q. ATTORNEY  
Signature of Attorney for Debtor(s)

Date 12/18/2017  
MM / DD / YYYY

321 Supreme Drive  
Address Line 1

\_\_\_\_\_  
Address Line 2

Oxford, MS 38655  
City, State, and Zip Code

(662) 765-4321      101  
Telephone Number      MS Bar Number

johnnattorney@aol.com  
Email Address

CHAPTER 13 PLAN  
UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MISSISSIPPI

Debtor: \_\_\_\_\_ SSN: XXX-XX-\_\_\_\_\_  
Joint Debtor: \_\_\_\_\_ SSN: XXX-XX-\_\_\_\_\_  
Address: \_\_\_\_\_  
CASE NO. \_\_\_\_\_  
Median Income:  Above  Below

**THIS PLAN DOES NOT ALLOW CLAIMS. Creditors must file a proof of claim to be paid under any plan that may be confirmed. The treatment of ALL secured and priority debts must be provided for in this plan.**

**PAYMENT AND LENGTH OF PLAN**

The plan period shall be for a period of \_\_\_\_\_ months, not to be less than 36 months for below median income debtor(s), or less than 60 months for above median income debtor(s).

(A) Debtor shall pay \$ \_\_\_\_\_ ( monthly,  semi-monthly,  weekly, or  bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(B) Joint Debtor shall pay \$ \_\_\_\_\_ ( monthly,  semi-monthly,  weekly, or  bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PRIORITY CREDITORS.**

Filed claims which are not disallowed are to be paid in full or as ordered by the Court as follows:

Internal Revenue Service: \$ \_\_\_\_\_ at \$ \_\_\_\_\_/month  
Mississippi Dept. of Revenue: \$ \_\_\_\_\_ at \$ \_\_\_\_\_/month  
Other/\_\_\_\_\_: \$ \_\_\_\_\_ at \$ \_\_\_\_\_/month

**DOMESTIC SUPPORT OBLIGATION. DUE TO:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

POST PETITION OBLIGATION: In the amount of \$ \_\_\_\_\_ per month beginning \_\_\_\_\_.  
To be paid  direct,  through payroll deduction, or  through the plan.

PRE-PETITION ARREARAGE: In the total amount of \$ \_\_\_\_\_ through \_\_\_\_\_ which shall be paid in the amount of \$ \_\_\_\_\_ per month beginning \_\_\_\_\_.  
To be paid  Direct,  through payroll deduction, or  through the plan.

**HOME MORTGAGES.** All claims secured by real property which are to be paid through the plan shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed herein, subject to the start date for the continuing monthly mortgage payment proposed herein.

Mtg pmts to \_\_\_\_\_ Beginning \_\_\_\_\_ @ \$ \_\_\_\_\_  Plan  Direct  
Mtg pmts to \_\_\_\_\_ Beginning \_\_\_\_\_ @ \$ \_\_\_\_\_  Plan  Direct  
Mtg pmts to \_\_\_\_\_ Beginning \_\_\_\_\_ @ \$ \_\_\_\_\_  Plan  Direct

Mtg arrears to \_\_\_\_\_ Through \_\_\_\_\_ \$ \_\_\_\_\_ @ \$ \_\_\_\_\_/mo  
Mtg arrears to \_\_\_\_\_ Through \_\_\_\_\_ \$ \_\_\_\_\_ @ \$ \_\_\_\_\_/mo  
Mtg arrears to \_\_\_\_\_ Through \_\_\_\_\_ \$ \_\_\_\_\_ @ \$ \_\_\_\_\_/mo



2.1

2.2

4.4

4.5

3.1  
(a)  
(b)

**MORTGAGE CLAIMS TO BE PAID IN FULL OVER PLAN TERM:**

Creditor: \_\_\_\_\_ Approx. amt. due: \_\_\_\_\_ Int. Rate: \_\_\_\_\_  
 Property Address: \_\_\_\_\_ Are related taxes and/or insurance escrowed  Yes  No

3.1  
(c)

Creditor: \_\_\_\_\_ Approx. amt. due: \_\_\_\_\_ Int. Rate: \_\_\_\_\_  
 Property Address: \_\_\_\_\_ Are related taxes and/or insurance escrowed  Yes  No

**NON-MORTGAGE SECURED CLAIMS.** Creditors that have filed claims that are not disallowed are to retain lien(s) pursuant to 11 U.S.C. § 1325(a)(5)(B)(i)(I) until the payment of the debt determined as under non-bankruptcy law or discharge. Such creditors shall be paid as secured claimants the sum set out below or pursuant to other order of the Court. The portion of the claim not paid as secured shall be treated as a general unsecured claim.

3.2  
3.3

CREDITOR'S NAME	COLLATERAL	910* CLM	APPROX. AMT. OWED	VALUE	INT. RATE	PAY VALUE OR AMT. OWED
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

\* The column for "910 CLM" applies to both motor vehicles and "any other thing of value" as used in the "hanging paragraph" of 11 U.S.C. § 1325

**SPECIAL CLAIMANTS** including, but not limited to, co-signed debts, abandonment of collateral, direct payments by Debtor, etc. For all abandoned collateral Debtor will pay \$0.00 on the secured portion of the debt. Where the proposal is for payment, creditor must file a proof of claim to receive proposed payment.

3.4  
3.5

CREDITOR'S NAME	COLLATERAL	APPROX. AMT. OWED	PROPOSED TREATMENT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**STUDENT LOANS** which are not subject to discharge pursuant to 11 U.S.C. §§ 523(a)(8) and 1328(c) are as follows (such debts shall not be included in the general unsecured total):

n/a

CREDITOR'S NAME	APPROX. AMT. OWED	CONTRACTUAL MO. PMT.	PROPOSED TREATMENT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SPECIAL PROVISIONS** which may apply to any or all payments to be paid through the plan, including, but not limited to, adequate protection payments:

8.1  
1.3

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**GENERAL UNSECURED CLAIMS** total approximately \$\_\_\_\_\_. Such claims must be *timely filed* and not disallowed to receive payment as follows: \_\_\_\_\_ IN FULL (100%), \_\_\_\_\_%(percent) MINIMUM, or a total distribution of \$\_\_\_\_\_, with the Trustee to determine the percentage distribution. **Those general unsecured claims not timely filed shall be paid nothing, absent order of the Court.**

5.1

Total attorney fee charged: \$ \_\_\_\_\_  
Attorney fee previously paid: \$ \_\_\_\_\_  
Attorney fee to be paid in plan: \$ \_\_\_\_\_

The payment of administrative costs and aforementioned attorney fees are to be paid pursuant to Court order and/or local rules.

Automobile Insurance Co/Agent  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attorney for Debtor (Name/Address/Phone/Email)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone/Fax: \_\_\_\_\_

Telephone No. \_\_\_\_\_  
Facsimile No. \_\_\_\_\_  
Email address \_\_\_\_\_

DATED: \_\_\_\_\_ DEBTOR'S SIGNATURE \_\_\_\_\_

JOINT DEBTOR'S SIGNATURE \_\_\_\_\_

ATTORNEY'S SIGNATURE \_\_\_\_\_

**ADDITIONAL SECURED CLAIMS.**

CREDITOR'S NAME	COLLATERAL	910 CLAIM	APPROX. AMT. OWED	VALUE	INT. RATE	PAY VALUE OR AMT. OWED
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**ADDITIONAL SPECIAL CLAIMANTS.**

CREDITOR'S NAME	COLLATERAL	APPROX. AMT. OWED	PROPOSED TREATMENT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**ADDITIONAL SPECIAL PROVISIONS.**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ADDITIONAL DOMESTIC SUPPORT OBLIGATION**

DUE TO: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

POST PETITION OBLIGATION: In the amount of \$\_\_\_\_\_ per month beginning \_\_\_\_\_.  
 To be paid  direct,  through payroll deduction, or  through the plan.

PRE-PETITION ARREARAGE: In the total amount of \$\_\_\_\_\_ through \_\_\_\_\_ which shall be paid in  
 the amount of \$\_\_\_\_\_ per month beginning \_\_\_\_\_.  
 To be paid  direct,  through payroll deduction, or  through the plan.

**Fill in the information to identify your case and this filing.**

Debtor 1 **John Doe Smith**  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **17-12345**

Check if this is an amended filing

**Official Form 106A/B  
 Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

1 Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No Go to Part 2
- Yes Where is the property?

1 1

**123 Home Street**  
Street address, if available, or other description

**Oxford MS 38655-0000**  
City State ZIP Code

**Lafayette**  
County

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property

Current value of the entire property?	Current value of the portion you own?
\$150,000.00	\$150,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Fee simple

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.2

456 Main Street  
Street address, if available, or other description

Oxford MS 38655-0000  
City State ZIP Code

Lafayette  
County

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<u>\$60,000.00</u>	<u>\$60,000.00</u>

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Fee simple

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$210,000.00

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

3.1 Make: Ford  
 Model: F150  
 Year: 2010  
 Approximate mileage: 175,000  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<u>\$6,000.00</u>	<u>\$6,000.00</u>

Check if this is community property (see instructions)

3.2 Make: Toyota  
 Model: Camry  
 Year: 2016  
 Approximate mileage: 25,000  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<u>\$20,000.00</u>	<u>\$20,000.00</u>

Check if this is community property (see instructions)

Debtor 1 John Doe Smith

Case number (if known) 17-12345

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

4.1 Make: Honda
Model: Rancher
Year: 2016

Who has an interest in the property? Check one

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$4,500.00
Current value of the portion you own? \$4,500.00

Other information:
ATV

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here=>

\$30,500.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings
Examples: Major appliances, furniture, linens, china, kitchenware

- No
 Yes. Describe.....

microwave (\$25), toaster oven (\$25), oven/stove (\$500), refrigerator (\$500), dishwasher (\$200), washer & dryer (\$250), deep freezer (\$150), pots & pans (\$125), silverware (\$50), cooking utensils (\$50), sofa (\$100), recliner (\$100), kitchen table and chairs (\$100), end tables (\$50), lamps (\$50), rugs (\$50), linens (\$50), dishes and cups/mugs (\$50), 2 dressers (\$200), 1 chest of drawers (\$75), 3 nightstands (\$50), 1 king size mattress and headboard (\$200), 2 queen mattresses and headboards (\$200), 2 bookshelves (\$50), 1 television console (\$100), 1 electric grill (\$50), 1 push lawnmower (\$150), household decor items (\$400), misc. household and yard tools (\$100)

\$4,000.00

7. Electronics
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No
 Yes. Describe.....

1 36" television (\$50), 1 42" television (\$50), 2 DVD players (\$50), 1 stereo (\$25), 1 playstation and 6 games (\$100), 2006 Dell laptop computer (\$50), iPad 3 (\$75), 1 iPhone 5 (\$50), 1 printer (\$25), 1 Cannon point & shoot camera (\$25), CD collection (\$100)

\$600.00

1 60" flat screen television

\$300.00

Mac Computer

\$500.00

8. Collectibles of value
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No



Debtor 1 John Doe Smith

Case number (if known) 17-12345

Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

Golf clubs

\$100.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

Smith and Wesson .38 revolver (\$100.00)  
Winchester 20 guage shotgun (\$100.00)

\$200.00

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

Men's clothing, shoes and accessories

\$1,000.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

Timex watch

\$10.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

CPAP machine

\$200.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

\$6,910.00

**Part 4:** Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

Cash \$50.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- No
- Yes.....

Institution name:

17.1. Checking Regions Bank \$50.00

17.2. Regions Bank \$10.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- No
- Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- No
- Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- No
- Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- No
- Yes. List each account separately.

Type of account:

Institution name:

401 (K) through employer \$10,000.00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- No
- Yes. ....

Institution name or individual:

Electric Deposit of \$100.00 with TVEPA \$100.00

Water Deposit of \$50.00 with City of Oxford \$50.00

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

- No
- Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABL program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- No
- Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

Debtor 1 John Doe Smith

Case number (if known) 17-12345

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- No
- Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property  
*Examples: Internet domain names, websites, proceeds from royalties and licensing agreements*

- No
- Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles  
*Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses*

- No
- Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- No
- Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal Income Tax Refund (\$5,000.00)

\$5,000.00

State Tax Return

\$5,000.00

Earned Income Tax Credit

\$5,000.00

29. Family support

*Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement*

- No
- Yes. Give specific information.....

30. Other amounts someone owes you

*Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else*

- No
- Yes. Give specific information..

31. Interests in insurance policies

*Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance*

- No
- Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Term Life Policy thorough emplouer

minor child

\$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- No
- Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment  
Examples: Accidents, employment disputes, insurance claims, or rights to sue

- No
- Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- No
- Yes. Describe each claim.....

35. Any financial assets you did not already list

- No
- Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

**\$25,260.00**

**Part 5:** Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- No. Go to Part 6.
- Yes. Go to line 38.

**Part 6:** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.
- Yes. Go to line 47.

**Part 7:** Describe All Property You Own or Have an Interest In That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- No
- Yes. Give specific information.....

1995 Ace Mobile Home

**\$5,500.00**

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

**\$5,500.00**

**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....			<b>\$210,000.00</b>
56. Part 2: Total vehicles, line 5	<u>\$30,500.00</u>		
57. Part 3: Total personal and household items, line 15	<u>\$6,910.00</u>		
58. Part 4: Total financial assets, line 36	<u>\$25,260.00</u>		
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>		
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>		
61. Part 7: Total other property not listed, line 54	<u>+ \$5,500.00</u>		
62. Total personal property. Add lines 56 through 61...	<u>\$68,170.00</u>	Copy personal property total	<u>\$68,170.00</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62			<b>\$278,170.00</b>

**Fill in the information to identify your case.**

Debtor 1 **John Doe Smith**  
First Name Middle Name Last Name

Debtor 2  
(Spouse if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **17-12345**  
(if known)

Check if this is an amended filing

**Official Form 106C  
 Schedule C: The Property You Claim as Exempt**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1** Identify the Property You Claim as Exempt

- Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2 For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
123 Home Street Oxford, MS 38655 Lafayette County Line from <i>Schedule A/B</i> : 1.1	\$150,000.00	<input checked="" type="checkbox"/> \$75,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-21
microwave (\$25), toaster oven (\$25), oven/stove (\$500), refrigerator (\$500), dishwasher (\$200), washer & dryer (\$250), deep freezer (\$150), pots & pans (\$125), silverware (\$50), cooking utensils (\$50), sofa (\$100), recliner (\$100), kitchen table and chairs Line from <i>Schedule A/B</i> : 6.1	\$4,000.00	<input checked="" type="checkbox"/> \$4,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
1 36" television (\$50), 1 42" television (\$50), 2 DVD players (\$50), 1 stereo (\$25), 1 playstation and 6 games (\$100), 2006 Dell laptop computer (\$50), iPad 3 (\$75), 1 iPhone 5 (\$50), 1 printer (\$25), 1 Cannon point & shoot camera (\$25), CD collection (\$10) Line from <i>Schedule A/B</i> : 7.1	\$600.00	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)

Debtor 1 **John Doe Smith**Case number (if known) **17-12345**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
1 60" flat screen television Line from Schedule A/B: 7.2	\$300.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
Golf clubs Line from Schedule A/B: 9.1	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
Smith and Wesson .38 revolver (\$100.00) Winchester 20 guage shotgun (\$100.00) Line from Schedule A/B: 10.1	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
Men's clothing, shoes and accessories Line from Schedule A/B: 11.1	\$1,000.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
Timex watch Line from Schedule A/B: 12.1	\$10.00	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
CPAP machine Line from Schedule A/B: 14.1	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
Cash Line from Schedule A/B: 16.1	\$50.00	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)
401 (K) through employer Line from Schedule A/B: 21.1	\$10,000.00	<input checked="" type="checkbox"/> \$10,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(e)
Federal: Federal Income Tax Refund (\$5,000.00) Line from Schedule A/B: 28.1	\$5,000.00	<input checked="" type="checkbox"/> \$5,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(j)
State Tax Return Line from Schedule A/B: 28.2	\$5,000.00	<input checked="" type="checkbox"/> \$5,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(k)
Earned Income Tax Credit Line from Schedule A/B: 28.3	\$5,000.00	<input checked="" type="checkbox"/> \$5,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(l)

Debtor 1 **John Doe Smith**

Case number (if known) **17-12345**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
1995 Ace Mobile Home Line from Schedule A/B: 53.1	\$5,500.00	<input checked="" type="checkbox"/> \$5,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(d)

3. Are you claiming a homestead exemption of more than \$160,376?  
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
- No
  - Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
    - No
    - Yes

**Fill in this information to identify your case.**

Debtor 1 **John Doe Smith**  
First Name Middle Name Last Name

Debtor 2  
(Spouse if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **17-12345**  
(if known)

Check if this is an amended filing

Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

**Part 2 List All Secured Claims**

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion if any
\$9,000.00	\$5,500.00	\$4,000.00

2.1 **Ditech**  
Creditor's Name

Describe the property that secures the claim:  
**1995 Aco Mobile Home**

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) **Purchase Money Security**

Date debt was incurred

Last 4 digits of account number

2.2 **First Heritage Credit**  
Creditor's Name

Describe the property that secures the claim:  
**push lawn mower, electric grill, 36" tv, 42" tv and point and shoot Cannon camera and Mac Computer**

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) **non-PMSI (UCC filed)**

Date debt was incurred **July, 2014**

Last 4 digits of account number



Debtor 1 **John Doe Smith**  
First Name Middle Name Last Name

Case number (if known) **17-12345**

**2.3 Ford Motor Credit** Describe the property that secures the claim: **\$8,000.00** **\$6,000.00** **\$2,000.00**  
Creditor's Name

**2010 Ford F150 175,000 miles**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Date debt was incurred Last 4 digits of account number

**2.4 Franklin Credit Management** Describe the property that secures the claim: **\$50,000.00** **\$150,000.00** **\$0.00**  
Creditor's Name

**2nd Deed of Trust on house at 123 Home St., Oxford, MS**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Date debt was incurred Last 4 digits of account number

**2.5 Home Place HOA, Inc.** Describe the property that secures the claim: **\$200.00** **\$150,000.00** **\$0.00**  
Creditor's Name

**123 Home Street Oxford, MS**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) **lien on property for homeowner dues for 2016**

Date debt was incurred Last 4 digits of account number

Debtor 1 **John Doe Smith**  
First Name Middle Name Last Name

Case number (if known) **17-12345**

**2.6** **Honda Finance** Describe the property that secures the claim: **\$5,000.00** **\$4,500.00** **\$500.00**  
Creditor's Name

**2016 Honda Rancher  
ATV**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) **PMSI**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

**2.7** **Lafayette County Chancery Clerk** Describe the property that secures the claim: **\$1,500.00** **\$150,000.00** **\$0.00**  
Creditor's Name

**123 Home Street, Oxford, MS**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

**2.8** **Mississippi Department of Revenue** Describe the property that secures the claim: **\$2,000.00** **\$3,500.00** **\$**  
Creditor's Name

**equity in non-exempt property**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

Debtor 1 **John Doe Smith**  
First Name Middle Name Last Name

Case number (if know) **17-12345**

**2.9** **Ocwen Loan Servicing** Describe the property that secures the claim: **\$170,000.00** **\$150,000.00** **\$20,000.00**

Creditor's Name  
  
Number, Street, City, State & Zip Code

**123 Home Street Oxford, MS 38655  
Lafayette County**

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Date debt was incurred Last 4 digits of account number

**2.1** **0** **Republic Finance** Describe the property that secures the claim: **\$3,000.00** **\$325.00** **\$2,675.00**

Creditor's Name  
  
Number, Street, City, State & Zip Code

**tools, Smith & Wesson Revolver,  
stereo, 42" tv, DVD Player**

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) **non-PMSI (UCC filed)**

Date debt was incurred Last 4 digits of account number

**2.1** **1** **Tower Loan** Describe the property that secures the claim: **\$1,500.00** **\$300.00** **\$1,200.00**

Creditor's Name  
  
Number, Street, City, State & Zip Code

**Dell laptop, iPad, deep freezer,  
Playstation & games**

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) **non-PMSI (UCC filed)**

Date debt was incurred **December, 2015** Last 4 digits of account number

Debtor 1 **John Doe Smith**  
 First Name Middle Name Last Name

Case number (if know) **17-12345**

2.1  
 2 **Toyota Financial** Describe the property that secures the claim: **\$26,000.00** **\$20,000.00** **\$6,000.00**  
 Creditor's Name **2016 Toyota Camry 25,000 miles**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

2.1  
 3 **Wells Fargo Bank** Describe the property that secures the claim: **\$20,000.00** **\$60,000.00** **\$0.00**  
 Creditor's Name **456 Main Street Oxford, MS 38655**  
**Lafayette County**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:  
 If this is the last page of your form, add the dollar value totals from all pages.  
 Write that number here:

**\$298,200.00**  
**\$298,200.00**

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

**Fill in the information to identify your case**

Debtor 1 **John Doe Smith**  
First Name Middle Name Last Name

Debtor 2  
First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF MISSISSIPPI**

Case number **17-12345**  
(if known)

Check if this is an amended filing

**Official Form 106E/F**  
**Schedule E/F: Creditors Who Have Unsecured Claims** **12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1** List All of Your PRIORITY Unsecured Claims

- Do any creditors have priority unsecured claims against you?  
 No. Go to Part 2  
 Yes
- List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2 1	<b>Internal Revenue Service</b> Priority Creditor's Name	\$2,000.00	\$2,000.00	\$0.00
	Last 4 digits of account number			
	When was the debt incurred?			
	Number Street City State Zip Code			
	Who incurred the debt? Check one.			
	<input checked="" type="checkbox"/> Debtor 1 only			
	<input type="checkbox"/> Debtor 2 only			
	<input type="checkbox"/> Debtor 1 and Debtor 2 only			
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Contingent			
	<input type="checkbox"/> Unliquidated			
	<input type="checkbox"/> Disputed			
	Type of PRIORITY unsecured claim:			
	<input type="checkbox"/> Domestic support obligations			
	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government			
	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
	<input type="checkbox"/> Other. Specify			

Debtor 1 John Doe Smith

Case number (if known) 17-12345

2.2 MDHS Last 4 digits of account number \$0.00 \$0.00 \$0.00  
Priority Creditor's Name

Number Street City State Zip Code  
Who incurred the debt? Check one.

- Debtor 1 only
  - Debtor 2 only
  - Debtor 1 and Debtor 2 only
  - At least one of the debtors and another
  - Check if this claim is for a community debt
- Is the claim subject to offset?
- No
  - Yes

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify \_\_\_\_\_

**MDHS - ongoing \$150.00 per month  
arrear \$2,000.00 total**

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1 Approved Cash Last 4 digits of account number \_\_\_\_\_ \$240.00  
Nonpriority Creditor's Name

Number Street City State Zip Code  
Who incurred the debt? Check one.

- Debtor 1 only
  - Debtor 2 only
  - Debtor 1 and Debtor 2 only
  - At least one of the debtors and another
  - Check if this claim is for a community debt
- Is the claim subject to offset?
- No
  - Yes

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify pay day loan

Debtor 1 John Doe Smith

Case number (if known) 17-12345

4.2

**AT&T**  
Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$112.00

When was the debt incurred? \_\_\_\_\_

Number Street City State Zip Code \_\_\_\_\_  
Who incurred the debt? Check one.

As of the date you file, the claim is: Check all that apply

- Debtor 1 only
  - Debtor 2 only
  - Debtor 1 and Debtor 2 only
  - At least one of the debtors and another
  - Check if this claim is for a community debt
- Is the claim subject to offset?
- No
  - Yes

- Contingent
  - Unliquidated
  - Disputed
- Type of NONPRIORITY unsecured claim:
- Student loans
  - Obligations arising out of a separation agreement or divorce that you did not report as priority claims
  - Debts to pension or profit-sharing plans, and other similar debts
  - Other. Specify cellular phone service

4.3

**Baptist Memorial Hospital**  
Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$5,000.00

When was the debt incurred? \_\_\_\_\_

Number Street City State Zip Code \_\_\_\_\_  
Who incurred the debt? Check one.

As of the date you file, the claim is: Check all that apply

- Debtor 1 only
  - Debtor 2 only
  - Debtor 1 and Debtor 2 only
  - At least one of the debtors and another
  - Check if this claim is for a community debt
- Is the claim subject to offset?
- No
  - Yes

- Contingent
  - Unliquidated
  - Disputed
- Type of NONPRIORITY unsecured claim:
- Student loans
  - Obligations arising out of a separation agreement or divorce that you did not report as priority claims
  - Debts to pension or profit-sharing plans, and other similar debts
  - Other. Specify medical bills

4.4

**Capital One**  
Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ \$4,000.00

When was the debt incurred? \_\_\_\_\_

Number Street City State Zip Code \_\_\_\_\_  
Who incurred the debt? Check one.

As of the date you file, the claim is: Check all that apply

- Debtor 1 only
  - Debtor 2 only
  - Debtor 1 and Debtor 2 only
  - At least one of the debtors and another
  - Check if this claim is for a community debt
- Is the claim subject to offset?
- No
  - Yes

- Contingent
  - Unliquidated
  - Disputed
- Type of NONPRIORITY unsecured claim:
- Student loans
  - Obligations arising out of a separation agreement or divorce that you did not report as priority claims
  - Debts to pension or profit-sharing plans, and other similar debts
  - Other. Specify credit card

Debtor 1 John Doe Smith

Case number (if know) 17-12345

4.5

**Dish Network**

Nonpriority Creditor's Name

Last 4 digits of account number

\$224.00

When was the debt incurred?

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify satellite tv

4.6

**Fidelity National Loans**

Nonpriority Creditor's Name

Last 4 digits of account number

\$350.00

When was the debt incurred?

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify pay day loan

4.7

**Santander**

Nonpriority Creditor's Name

Last 4 digits of account number

\$1,000.00

When was the debt incurred?

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify deficiency balance on repossed vehicle



Debtor 1 John Doe Smith

Case number (if known) 17-12345

4.8

**U.S. Dept. of Education**  
Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_ **\$25,000.00**

When was the debt incurred? \_\_\_\_\_

Number Street City State Zip Code  
Who incurred the debt? Check one.

As of the date you file, the claim is: Check all that apply

- Debtor 1 only
  - Debtor 2 only
  - Debtor 1 and Debtor 2 only
  - At least one of the debtors and another
  - Check if this claim is for a community debt
- Is the claim subject to offset?
- No
  - Yes

- Contingent
  - Unliquidated
  - Disputed
- Type of NONPRIORITY unsecured claim:
- Student loans
  - Obligations arising out of a separation agreement or divorce that you did not report as priority claims
  - Debts to pension or profit-sharing plans, and other similar debts
  - Other. Specify \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only, 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <u>2,000.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <u>2,000.00</u>
Total claims from Part 2	6f. Student loans	6f.	\$ <u>25,000.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ <u>10,926.00</u>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ <u>35,926.00</u>

**Fill in this information to identify your case:**

Debtor 1                    **John Doe Smith**  
First Name                    Middle Name                    Last Name

Debtor 2  
(Spouse if filing)      First Name                    Middle Name                    Last Name

United States Bankruptcy Court for the:      **NORTHERN DISTRICT OF MISSISSIPPI**

Case number      **17-12345**  
(if known)

Check if this is an amended filing

**Official Form 106G**  
**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1 Do you have any executory contracts or unexpired leases?  
 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- 2 List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

<b>Person or company with whom you have the contract or lease</b>	<b>State what the contract or lease is for</b>
<small>Name Number Street City State and ZIP Code</small>	

2.1 <b>Rent-A-Center</b>	<b>60 " flat screen television, sofa, recliner and 2 end tables</b>
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