B 22C (Official Form 22C) (Chapter 13) (01/08)

In re

Debtor(s)

Case Number:

(If known)

According to the calculations required by this statement:
☐ The applicable commitment period is 3 years.
The applicable commitment period is 5 years.
Disposable income is determined under § 1325(b)(3).
Disposable income is not determined under § 1325(b)(3).
(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

Part I. REPORT OF INCOME								
1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10. All figures must reflect average monthly income received from all sources, derived during the Column A Column B							
	six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.							Spouse's Income
2	Gross	wages, salary, tips, bonuses, overtim	e, commiss	ions.			\$	\$
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.							
	a.	Gross receipts		\$				
	b.	Ordinary and necessary business exp	enses	\$				
	c.	Business income		Subtract l	Line b from Line a		\$	\$
	in the	and other real property income. Sub- appropriate column(s) of Line 4. Do no art of the operating expenses entered	ot enter a nu	mber less	than zero. Do not incl			
4	a.	Gross receipts		\$				
	b.	Ordinary and necessary operating exp	penses	\$				
	c.	Rent and other real property income		Subtract I	Line b from Line a		\$	\$
5	Intere	st, dividends, and royalties.					\$	\$
6	Pensio	on and retirement income.					\$	\$
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.						\$	\$
8 Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:								
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ Spouse \$						\$	\$

						-	
9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.						
	a.		\$				
	b.		\$		\$	\$	
10		I. Add Lines 2 thru 9 in Column A, and, if Column B is complete 9 in Column B. Enter the total(s).	ed, add Lines 2		\$	\$	
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.						
		Part II. CALCULATION OF § 1325(b)(4) CO	MMITMENT I	PEF	RIOD		
12	Enter th	e amount from Line 11.				\$	
13	Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.						
	a.		\$				
	b. c.		\$ \$				
		d enter on Line 13.	+			\$	
14	Subtrac	t Line 13 from Line 12 and enter the result.				\$	
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.						
16		ble median family income. Enter the median family income for formation is available by family size at <u>www.usdoj.gov/ust/</u> or fr					
	a. Enter	debtor's state of residence: b. Enter debtor's	s household size:			\$	
	Applica	tion of § 1325(b)(4). Check the applicable box and proceed as d	irected.				
17	The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitmost of years" at the top of page 1 of this statement and continue with this statement.						
		amount on Line 15 is not less than the amount on Line 16. Cl years" at the top of page 1 of this statement and continue with the		he ap	oplicable comn	nitment period	
	Part II	II. APPLICATION OF § 1325(b)(3) FOR DETERM	MINING DISPO	DSA	BLE INCO	OME	
18	Enter th	e amount from Line 11.				\$	

19								
	a.					\$		
	b.					\$		
	с.					\$	J	
	Total and enter on Line 19.							
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.							
21		lized current monthly income ter the result.	for § 1325(b)(3	5). Mul	tiply the an	nount from Line 20) by the number 12	2 \$
22	Applic	able median family income. Er	ter the amount	from L	ine 16.			\$
	Applic	cation of § 1325(b)(3). Check the	e applicable box	and p	oceed as di	rected.		
23	The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is de							ent. ne is not
		Part IV. CALCU	LATION OF	F DEI	DUCTIO	NS FROM INC	COME	
		Subpart A: Deductions u	ınder Standa	ards o	of the Inte	ernal Revenue	Service (IRS)	
24A	24A National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable household size. (This information is available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy court.)						\$	
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out- of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out- of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.							
	Hous	ehold members under 65 years	s of age	Hous	ehold men	ibers 65 years of a	age or older	
	a1.	Allowance per member		a2.	Allowanc	e per member		
	b1.	Number of members		b2.	Number o	f members		
	c1.	Subtotal		c2.	Subtotal			\$
25A	25A Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information						\$	

	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.						
25B	a.	IRS Housing and Utilities Standards; mortgage/rent expense	\$				
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$				
	с.	Net mortgage/rental expense	Subtract Line b from Line a.	\$			
26	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:						
27A	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. 0 1 1 2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy court.)						
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) I I 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 c. Net ownership/lease expense for Vehicle 1						
			\$				

				0				
Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.								
29	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.							
_>	a.	IRS Transportation Standards, Ownership Costs	\$					
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$					
	с.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$				
30	federa	Necessary Expenses: taxes. Enter the total average monthly expe l, state, and local taxes, other than real estate and sales taxes, such social-security taxes, and Medicare taxes. Do not include real esta	as income taxes, self-employment	\$				
31	31 Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.							
32	32 Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.							
33	 Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 49. 							
34Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.								
35	35 Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.							
36	36 Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.							
37	37 Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.							
38	Total	Expenses Allowed under IRS Standards. Enter the total of Lines	24 through 37.	\$				
	Subpart B: Additional Living Expense Deductions							
	Note: Do not include any expenses that you have listed in Lines 24-37							

						0		
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.							
20	a.	Health Insurance			\$			
39	b.	Disability Insurar	nce		\$			
	c.	Health Savings A	ccount		\$			
	Total an	d enter on Line 39					¢	
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$							
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.							
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.							
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.							
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.						\$	
44	clothing National <u>www.us</u>	expenses exceed th Standards, not to e doj.gov/ust/ or from	ing expense. Enter the total average combined allowances for foo xceed 5% of those combined allowance in the clerk of the bankruptcy coable and necessary.	d and cloth llowances.	ing (apparel and ser (This information is	rvices) in the IRS available at	\$	
45	charitab	le contributions in t	Enter the amount reasonably ne he form of cash or financial ins Do not include any amount in	truments to	a charitable organi	zation as defined in	\$	
46	Total A	dditional Expense	Deductions under § 707(b). E	nter the tot	al of Lines 39 throu	gh 45.	\$	
	-		Subpart C: Deductio	ns for De	bt Payment			
	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.							
47	a. b. c.	Name of Creditor	Property Securing the D		Average Monthly Payment \$ \$ \$	Does payment include taxes or insurance? yes no yes no yes no		
					Total: Add Lines a, b, and c		\$	
							1	

48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount a. \$ b. \$ c. \$ Image: secure of the secure						
				Total: Add Lines a, b, and c	\$		
49	as pri	ority tax, child support a	iority claims. Enter the total amount, divid and alimony claims, for which you were lia nt obligations, such as those set out in Li	ble at the time of your bankruptcy	\$		
		oter 13 administrative of the second se	expenses. Multiply the amount in Line a by nse.	the amount in Line b, and enter the			
	a.	Projected average mon	thly chapter 13 plan payment.	\$			
50	b.	schedules issued by the	your district as determined under e Executive Office for United States ation is available at <u>www.usdoj.gov/ust/</u> e bankruptcy court.)	x			
	c.	Average monthly admi	nistrative expense of chapter 13 case	Total: Multiply Lines a and b	\$		
51	Tota	Deductions for Debt I	Payment. Enter the total of Lines 47 throug	th 50.	\$		
			Subpart D: Total Deductions fro	om Income			
52	Tota	l of all deductions from	income. Enter the total of Lines 38, 46, ar	nd 51.	\$		
T	•	Part V. DETERN	IINATION OF DISPOSABLE IN	COME UNDER § 1325(b)(2)			
53	Tota	l current monthly inco	me. Enter the amount from Line 20.		\$		
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.						
55	wage	s as contributions for qu	tions. Enter the monthly total of (a) all amo alified retirement plans, as specified in § 5- rement plans, as specified in § 362(b)(19).	41(b)(7) and (b) all required	\$		
56	Tota	l of all deductions allov	ved under § 707(b)(2). Enter the amount f	from Line 52.	\$		

- (-						8	
	which a-c be Line 5	ify additional expenses fine resulting expenses in lises and enter the total in penses and you must appenses necessary and	ines				
57		Nature of special circumstances	Amount of	of expense			
	a.		\$				
	b.		\$				
	с.		\$				
			Total: A	ld Lines a, b, and c	2	\$	
58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.						
59	Mont	hly Disposable Income Under § 1325(b)(2). Subtract Line 58 fr	om Line 5	3 and enter the result.		\$	
		Part VI: ADDITIONAL EXPEN	SE CLA	IMS			
	and w incom	Expenses. List and describe any monthly expenses, not otherwise elfare of you and your family and that you contend should be an are under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources ge monthly expense for each item. Total the expenses.	additional	deduction from your curr	rent m	onthly	
60		Expense Description		Monthly Amount			
	a.			\$			
	b.			\$			
	с.			\$			
		Total: Add Lines a, b	, and c	\$			
		Part VII: VERIFICAT	ION				
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a both debtors must sign.)						
61 Date: Signature: (Debtor)							
			<u></u>	(Debtor)			
		Date: Sig	nature:				
			(Joi	nt Debtor, if any)			