## **CLASS 1 CHECKLIST**

## FILE WITH TRUSTEE ONLY DO NOT FILE WITH THE COURT

Bk Case #:

Debtor Name(s):	Bk Ca	ise #:	
Property Address:			
Residence Rental Other Describe:			
Daytime Phone: ( )	Ever	ning: (	
Attorney name: (if any)			
THE FOLLOWING INFORMATION I CLAIMS LISTED IN CLASS 1. PLEA FORM TO THE BEST OF YOUR ABI PAYMENT COUPON OR STATEMEN FROM EACH CREDITOR.	SE BE SUR LITY AND	E TO CO ATTACH	MPLETE THIS THE
Creditor Name:			
Account #:			
Payment Address: Street Address	S		
City Creditor Phone Number: (if known)	State		Cip
Regular Monthly Payment Amount: \$ Monthly Payment Due Date:		Current Inte	erest Rate:
Date Payment Late:	Monthly Late Charge Amount: \$		
Is this a variable interest rate loan? If yes, when is the next anticipated adjust	ment date?	Yes	No
Are property taxes included in the monthly payment?		Yes	No
Is insurance included in the monthly payment?		Yes	No
Is the loan due in full and payable in less than 5 years?  If yes, date due:		Yes	No