

INITIAL REPORTING REQUIREMENTS FOR CHAPTER 11 DEBTORS

Debtor

Case No.

NOTE: Failure to comply with the United States Trustee's minimum Initial Reporting Requirements may be cause for conversion or dismissal of the case.

The debtor must submit the following with this cover sheet:		Yes	No
1	UST-2 Collateralization Certificate.	<input type="checkbox"/>	<input type="checkbox"/>
2	UST-3 Summary of Insurance. The debtor shall provide adequate proof of insurance, including, but not limited to, a certificate of insurance for each insurance policy. <u>An application for insurance is not adequate proof of insurance.</u>	<input type="checkbox"/>	<input type="checkbox"/>
3	Most recently filed federal income tax return.	<input type="checkbox"/>	<input type="checkbox"/>
4	Bank statements for last two months.	<input type="checkbox"/>	<input type="checkbox"/>
5	Year-end financial statements for last two years (i.e., annual balance sheets, income statements, and cash flow statements). Check here <input type="checkbox"/> if financial statements have not been prepared for any recent yearly period.	<input type="checkbox"/>	<input type="checkbox"/>
6	Most recent monthly financial statements (i.e., monthly balance sheet, income statement, and cash flow statement). Check here <input type="checkbox"/> if financial statements have not been prepared for any recent monthly period.	<input type="checkbox"/>	<input type="checkbox"/>
7	UST-4 Six-month Cash Projection & Budget	<input type="checkbox"/>	<input type="checkbox"/>
8	Signed copy of Official Bankruptcy Form B-21: "Statement of Social Security Number" (Individuals Only)	<input type="checkbox"/>	<input type="checkbox"/>
9	Proof of establishment of debtor in possession bank account.	<input type="checkbox"/>	<input type="checkbox"/>

DEBTOR'S CERTIFICATION

I certify under penalty of perjury that the information contained in the debtor's Initial Reporting Requirements are complete, true, and accurate to the best of my knowledge, information, and belief.

Debtor's Signature

Date

Title

The debtor, or trustee, if appointed, must sign this cover sheet accompanying the Initial Reporting Requirements. Only an officer has authority to sign the cover sheet for a corporate debtor and only a general partner has authority to sign the cover sheet for a partnership debtor. Debtor's counsel may not sign the Initial Reporting Requirements for the debtor.

UST-2 COLLATERALIZATION CERTIFICATE
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11 U.S.C. § 345(b)

§ 345(b) of the Bankruptcy Code requires a chapter 11 debtor to protect its creditors' interests by depositing bankruptcy funds in a financial institution that will collateralize or bond the debtor's funds in favor of the United States. The financial institution must be approved by the United States Trustee in the district where the bankruptcy case is filed.

To assist a debtor in meeting the requirements of § 345(b), the United States Trustee for the District of Montana has executed depository agreements with a number of local and regional banks ("authorized depositories"). A list of such banks has been enclosed. Each participating bank on the list has agreed to comply with the provisions of § 345(b) and to make regular reports to the United States Trustee. A collateralization certificate, when signed by an authorized depository, is the bank's acknowledgment that it will comply with its depository agreement with the United States Trustee for a particular bankruptcy case.

Debtor's Instructions

Within 10 days of filing a bankruptcy petition, the debtor shall submit to the United States Trustee a Collateralization Certificate from each bank holding the debtor's funds. For each bank holding the debtor's funds, have a representative of the bank sign a Collateralization Certificate listing each of the debtor's accounts at that institution. The debtor is responsible for returning the completed Collateralization Certificate to: **Office of the United States Trustee, 301 Central Avenue, Suite 204, Great Falls, MT 59401.**

If the debtor's bank is not an authorized depository, the debtor shall either move bankruptcy funds to a participating bank, or request that the bank sign a depository agreement with the United States Trustee. If choosing the latter option, please contact the Bankruptcy Analyst assigned to the debtor's case at (406) 761-8777. The Bankruptcy Analyst will assist the debtor in determining whether the bank is willing to sign a depository agreement.

Depository, please complete the following:

This depository certifies that we hold estate funds for:

Debtor's Name

Debtor's Account No(s).

Bank Name

Bank Address

Bank Representative's Name

Title

Bank Representative's Signature

Date

Telephone No. ()

Fax No. ()

We further certify that we have taken steps to ensure that if estate funds ever exceed FDIC or FSLIC limits, we will immediately pledge collateral with the Federal Reserve Bank in Minneapolis, Minnesota and we will sign the depository agreement required by the U.S. Trustee of all depositories with estate funds in excess of FDIC or FSLIC limits.



**U.S. Department of Justice
Office of the United States Trustee**

District of Montana

301 Central Avenue, Ste. 204 (406) 761-8777
Great Falls, MT 59401 (406) 761-8895 (fax)

**United States Trustee's List of Authorized Depositories
For Bankruptcy Cases Filed in the District of Montana**

As of February 15, 2010

Bank of America

Bank of New York Mellon

First Interstate Bank

JP Morgan Chase Bank

New York Community Bank

Stockman Bank

Sun Trust Bank

Union Bank

U.S. Bank

Wells Fargo Bank

Zions Bank

**UST-4 SIX-MONTH CASH
PROJECTION & BUDGET
(BUSINESS ONLY)**

PROJECTIONS AS OF _____

	MONTH 1	MONTH 2	MONTH 3	MONTH 4	MONTH 5	MONTH 6
BEGINNING CASH						
INFLOW						
CASH SALES						
A/R COLLECTION						
TOTAL INCOME						
OUTFLOW						
RENT OR MORTGAGE						
OFFICER SALARY						
EMPLOYEE WAGES						
PAYROLL TAXES						
EMPLOYEE BENEFITS						
BANK NOTES PAYABLE						
VEHICLE NOTES PAYABLE						
VEHICLE EXPENSES						
REPAIRS & MAINT.						
INSURANCE						
INVENTORY PURCHASES						
SUPPLIES						
UTILITIES						
OTHER (SPECIFY)						
TOTAL EXPENSES						
ENDING CASH						