

INITIAL REPORTING REQUIREMENTS FOR CHAPTER 11 DEBTORS

Case No. _____
 Debtor _____

THIS REPORT MUST BE SUBMITTED TO THE U.S. TRUSTEE WITHIN 14 DAYS AFTER THE PETITION IS FILED OR BEFORE THE INITIAL DEBTOR INTERVIEW, WHICHEVER DATE IS EARLIER. DO NOT FILE WITH COURT.

Debtor must attach each of the following documents or an explanation for the failure to attach the document.

REQUIRED DOCUMENTS

Mark One Box for Each Required Document

	Document Attached	Previously Filed	Explanation Attached
1 Most recently filed Federal income tax return.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Financial statements for the most recent year-end (i.e., balance sheet income statement, and cash flow statement)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Most recent monthly financial statements (i.e., month-end balance sheet, income statement, and cash flow statement)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Certificates of Insurance			
<i>General Liability Insurance</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Property (Fire, Theft, etc.) Insurance</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Workers' Compensation Insurance</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Vehicle Insurance:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Other:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Debtor in Possession Bank Account Information			
<i>Account number, name and address of financial institution for each account</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Sample voided check for each account</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Bank statements for the 90 days prior to the petition date for pre-petition accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Individual Debtors only: pay statements for 60 days prior to petition date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Six-Month Cash Projection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Business Debtors: use form UST-1A</i>			
<i>Non-Business Debtors: use form UST-1B</i>			

I declare under penalty of perjury that the information contained in these Initial Reporting Requirements, including any attachments thereto, is true and correct to the best of my knowledge and belief.

Date: _____

Signature(s): _____

Title: _____

**SIX-MONTH POST-PETITION CASH PROJECTIONS
(CHAPTER 11 BUSINESS DEBTOR)**

Case No _____
Debtor _____

Month: _____	Month: _____	Month: _____	Month: _____	Month: _____	Month: _____	Six-Month Total
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Beginning Cash Balance

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CASH RECEIPTS

Cash Sales						
Collection of Receivables						
Sale of Assets						
Post-Petition Borrowing						
Other: _____						
Other: _____						

TOTAL CASH RECEIPTS

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CASH DISBURSEMENTS

Auto/Truck Expenses						
Employee Benefits						
Insurance						
Inventory Purchases						
Officer Salaries						
Other Salaries/Wages						
Payroll Taxes						
Rent and Lease Payments						
Repairs and Maintenance						
Secured Debt Payments						
Supplies						
Utilities						
Professional Fees*						
UST Quarterly Fees						
Other: _____						
Other: _____						

TOTAL CASH DISBURSEMENTS

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NET CASH FLOW

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Ending Cash Balance

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**Requires Court approval*

**SIX-MONTH POST-PETITION CASH PROJECTIONS
(CHAPTER 11 NON-BUSINESS DEBTOR)**

Case No _____
Debtor _____

Month: _____	Month: _____	Month: _____	Month: _____	Month: _____	Month: _____	Six-Month Total
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Beginning Cash Balance

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CASH RECEIPTS

Net Wages						
Rental Income						
Sale of Assets						
Post-Petition Borrowing						
Other: _____						
Other: _____						

TOTAL CASH RECEIPTS

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CASH DISBURSEMENTS

Auto Loan/Lease Payments						
Domestic Support Obligations						
Insurance						
Mortgage Payments						
Other Secured Debt Payments						
Personal Living Expenses						
Rent						
Professional Fees*						
UST Quarterly Fees						
Other: _____						
Other: _____						

TOTAL CASH DISBURSEMENTS

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NET CASH FLOW

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Ending Cash Balance

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**Requires Court approval*