Form	B22A	(Chapter	7)	(10/05)

(If known)

In re

1

Debtor(s)

Case Number:

According to the calculations required by this statement:

The presumption arises.

The presumption does not arise.

(Check the box as directed in Parts I, III, and VI of this statement.)

### STATEMENT OF CURRENT MONTHLY INCOME AND MEANS TEST CALCULATION FOR USE IN CHAPTER 7 ONLY

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

## Part I. EXCLUSION FOR DISABLED VETERANS

If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

□ Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).

	Par	t II. CALCULATION OF MONTHL	Y INCOME FOR § 707(b)	(7) EXCLUS	ION
	Marita	I/filing status. Check the box that applies and	complete the balance of this part of	this statement as	directed.
	a. 🗌 l	Inmarried. Complete only Column A ("Debtor	's Income") for Lines 3-11.		
2	<ul> <li>b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11.</li> </ul>				
	с. 🗌 N Сс	Married, not filing jointly, without the declaration Diumn A ("Debtor's Income") and Column B	of separate households set out in Li (Spouse's Income) for Lines 3-1	ne 2.b above. <b>Corr</b> <b>1.</b>	plete both
		<i>l</i> arried, filing jointly. Complete both Column A nes 3-11.	("Debtor's Income") and Colum	n B ("Spouse's I	ncome") for
		rres must reflect average monthly income for the uptcy case, ending on the last day of the month b			Column B
	ferent	amounts of income during these six months, you six months, divide this total by six, and enter the	I must total the amounts received du	I <sup>r-</sup> Income	Spouse's Income
3	Gross wages, salary, tips, bonuses, overtime, commissions.			\$	\$
	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero. <b>Do not include any</b> part of the business expenses entered on Line b as a deduction in Part V.				
4	a.	Gross receipts	\$		
	b.	Ordinary and necessary business expenses	\$		
	С.	Business income	Subtract Line b from Line a	\$	\$
	Rent and other real property income. Subtract Line b from Line a and enter the difference on Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.				
5	а.	Gross receipts	\$		
	b.	Ordinary and necessary operating expenses	\$		
	C.	Rental income	Subtract Line b from Line a	\$	\$
6	Interest, dividends and royalties.			\$	\$
7	Pensio	n and retirement income.		\$	\$
8	Regular contributions to the household expenses of the debtor or the debtor's dependents, including child or spousal support. Do not include contributions from the debtor's spouse if Column B is completed.				\$

9	Unemployment compensation. Enter the amount in Column A and, if a However, if you contend that unemployment compensation received by was a benefit under the Social Security Act, do not list the amount of social 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 \$ Spont	use \$	\$	\$
10	Income from all other sources. If necessary, list additional sources on <b>not include</b> any benefits received under the Social Security Act or pay victim of a war crime, crime against humanity, or as a victim of internaterrorism. Specify source and amount.			
10	а.	\$		
	b.	\$		
	Total and enter on Line 10	\$	\$	
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Column A, and, if Column B is completed, add Lines 3 through 10 in Co total(s).	\$	\$	
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.			

nt from Line 12 by		
13 Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.		
olicable state and r from the clerk of		
size:	\$	
rected.		
e 14. Check the box rt VIII; do not comple		
	blicable state and r from the clerk of size: rected. e 14. Check the box	

The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)				
16	6 Enter the amount from Line 12.				
17	<b>Marital adjustment.</b> If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT regularly contributed to the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero.	\$			
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$			

	Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)				
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)				
19	<b>National Standards: food, clothing, household supplies, personal care, and miscella- neous.</b> Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applica- ble family size and income level. (This information is available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy court.)	\$			
20A	<b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size.	\$			

	(This information is available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy court).			
20B	amour (this ir Line b	<b>Standards: housing and utilities; mortgage/rent exp</b> at of the IRS Housing and Utilities Standards; mortgage/rent expen- nformation is available at <u>www.usdoj.gov/ust/</u> or from the clerk of the total of the Average Monthly Payments for any debts secured abtract Line b from Line a and enter the result in Line 20B. <b>Do not</b>	nse for your county and family size the bankruptcy court); enter on by your home, as stated in Line	
208	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$	
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$	
	C.	Net mortgage/rental expense	Subtract Line b from Line a.	\$
21	Lines 2 Housir	Standards: housing and utilities; adjustment. if you can 20B does not accurately compute the allowance to which and Utilities Standards, enter any additional amount to which you the basis for your contention in the space below:	you are entitled under the IRS	
				\$
	You ar	Standards: transportation; vehicle operation/public re entitled to an expense allowance in this category regardless of v ing a vehicle and regardless of whether you use public transportation	whether you pay the expenses of	
22	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 8. 0  1  2  or more.			
	Enter the ap	the amount from IRS Transportation Standards, Operating Costs & plicable number of vehicles in the applicable Metropolitan Statistic ation is available at <u>www.usdoj.gov/ust/</u> or from the clerk of the b	al Area or Census Region. (This	\$
23	of veh pense 1 Enter, able a erage	I Standards: transportation ownership/lease expense icles for which you claim an ownership/lease expense. (You may n for more than two vehicles.) □ 2 or more. in Line a below, the amount of the IRS Transportation Standards, t www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); of Monthly Payments for any debts secured by Vehicle 1, as stated in and enter the result in Line 23. Do not enter an amount less t	Ownership Costs, First Car (avail- enter in Line b the total of the Av- h Line 42; subtract Line b from	
	a.	IRS Transportation Standards, Ownership Costs, First Car	\$	
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	
	C.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$
24	only if Enter, (availa the Av	Standards: transportation ownership/lease expense you checked the "2 or more" Box in Line 23. in Line a below, the amount of the IRS Transportation Standards, able at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy cor- rerage Monthly Payments for any debts secured by Vehicle 2, as st ine a and enter the result in Line 24. <b>Do not enter an amount I</b>	Ownership Costs, Second Car urt); enter in Line b the total of ated in Line 42; subtract Line b	
27	а.	IRS Transportation Standards, Ownership Costs, Second Car	\$	
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$
25	for all	r Necessary Expenses: taxes. Enter the total average mont federal, state and local taxes, other than real estate and sales tax ent taxes, social security taxes, and Medicare taxes. Do not inclu	es, such as income taxes, self em-	
26	payrol union	r Necessary Expenses: mandatory payroll deductions I deductions that are required for your employment, such as mand dues, and uniform costs. Do not include discretionary amount c) contributions.	latory retirement contributions,	\$

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27	Other Necessary Expenses: life insurance. Enter 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.				\$
28	you ar	r Necessary Expenses: court-ordered pa e required to pay pursuant to court order, such a payments on past due support obligations in	s spousal or child support paymen		\$
29	29 Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total 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.				\$
30		r Necessary Expenses: childcare. Enter t n childcare. Do not include payments made for		ou actually ex-	\$
31	expen	r Necessary Expenses: health care. Enter d on health care expenses that are not reimburse t include payments for health insurance liste	d by insurance or paid by a health		\$
32       Other Necessary Expenses: telecommunication services. Enter the average monthly expenses that you actually pay for cell phones, pagers, call waiting, caller identification, special long distance or internet services necessary for the health and welfare of you or your dependents. Do not include any amount previously deducted.					\$
33	Total	Expenses Allowed under IRS Standard	s. Enter the total of Lines 19 throu	ıgh 32.	\$
	<b>.</b>	Subpart B: Additional Expe	ense Deductions under §	707(b)	ų.
		Note: Do not include any expens	es that you have listed in Li	ines 19-32	
		h Insurance, Disability Insurance and H we monthly amounts that you actually expend in e			
	a.	Health Insurance	\$		
34	b.	Disability Insurance	\$		
	с.	Health Savings Account	\$		
			Total: Add Lines a, b and c		\$
Continued contributions to the care of household or family members. Enter the 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.					\$
36	<ul> <li>Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law.</li> </ul>				\$
Home energy costs in excess of the allowance specified by the IRS Local Standards. Enter the average monthly amount by which your home energy costs exceed the allowance in the IRS Local Standards for Housing and Utilities. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.			\$		
38	Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$125 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.			\$	
39	Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not			\$	
40		nued charitable contributions. Enter the a f cash or financial instruments to a charitable org			\$
41	Total	Additional Expense Deductions under §	<b>707(b).</b> Enter the total of Lines	34 through 40	\$

			Subpart C: Deductions for	Debt	Payment		
	<b>Future payments on secured claims.</b> 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, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mort-gage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.						
42		Name of Creditor	Property Securing the Debt	60	-month Average Payment	]	
	a.			\$			
	b.			\$			
	C.			\$			
				Tota	I: Add Lines a, b and c.		\$
	<b>Past due payments on secured claims.</b> If any of the debts listed in Line 42 are in default, and the property securing the debt is necessary for your support or the support of your dependents, you may include in your deductions 1/60th of the amount that you must pay the creditor as a result of the default (the "cure amount") in order to maintain possession of the property. List any such amounts in the following chart and enter the total. If necessary, list additional entries on a separate page.						
43	-	Name of Creditor	Property Securing the Debt in Default	-	60th of the Cure Amount		
	а.			\$			
	b.			\$			
	C.			\$			
				Tota	al: Add Lines a, b and c		\$
44		nents on priority rt and alimony claims	<b>claims.</b> Enter the total amount of all pr s), divided by 60.	iority	claims (including priority chil	d	\$
	<b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.						
	a.	Projected average	monthly Chapter 13 plan payment.		\$		
45	45 b. Current multiplier for your district as determined under sched- ules issued by the Executive Office for United States Trustees. (This information is available at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy court.) x						
	C.	Average monthly a	dministrative expense of Chapter 13 cas	е	Total: Multiply Lines a and b		\$
					Г		
46	Total		Debt Payment. Enter the total of Line				\$
		Subp	art D: Total Deductions Allow	ed u	nder § 707(b)(2)		
47	Total	of all deductions	s allowed under § 707(b)(2). Ent	er the	total of Lines 33, 41, and 46	).	\$

# Part VI. DETERMINATION OF § 707 (b) (2) PRESUMPTION 48 Enter the amount from Line 18 (Current monthly income for § 707 (b) (2)) \$ 49 Enter the amount from Line 47 (Total of all deductions allowed under § 707 (b) (2)) \$ 50 Monthly disposable income under § 707 (b) (2). Subtract Line 49 from Line 48 and enter the result \$ 51 60-month disposable income under § 707 (b) (2). Multiply the amount in Line 50 by the number 60 and enter the result. \$

I UI III		0	
	Initial presumption determination. Check the applicable box and proceed as directed.		
	The amount on Line 51 is less than \$6,000 Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.		
52	□ The amount set forth on Line 51 is more than \$10,000. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.		
	The amount on Line 51 is at least \$6,000, but not more than \$10,000. Complete the rem VI (Lines 53 through 55).	mainder of Part	
53	Enter the amount of your total non-priority unsecured debt	\$	
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$	
	Secondary presumption determination. Check the applicable box and proceed as directed.		
55	The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.		
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the b sumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You plete Part VII.	•	

		Part VII: ADDITIONAL EXPENSE	CLAIMS		
E (	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should flect your average monthly expense for each item. Total the expenses.				
56		Expense Description	Monthly Amount	1	
	a.		\$		
	b.		\$		
	С.		\$		
		Total: Add Lines a, b and c	\$		

	Part VIII: VERIFICATION					
	I declare under penalty of perjury that the in both debtors must sign.)	nformation provided in this statement is true and correct.	(If this a joint case,			
57	Date:	Signature:(Debtor)				
	Date:	Signature:				