

Fill in this information to identify the case:

Debtor 1 _____

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number _____

Official Form 410C13-N

Trustee's Notice of Disbursements Made

12/25

The trustee must file this notice in a chapter 13 case within 45 days after the debtor completes all payments due to the trustee. Rule 3002.1(g)(1).

Part 1: Mortgage Information

Name of claim holder: _____

Court claim no. (if known): _____

Last 4 digits of any number you use to identify the debtor's account: _____

Property address:

Number Street

City State ZIP Code

Part 2: Statement of Completion

The debtor has completed all payments due the trustee under the chapter 13 plan. A copy of the trustee's disbursement ledger for all payments to the claim holder is attached or may be accessed here: _____ (web address).

Part 3: Arrearages

Amount

- | | |
|---|----------|
| a. Allowed amount of prepetition arrearage: | \$ _____ |
| b. Total amount of prepetition arrearage disbursed by the trustee: | \$ _____ |
| c. Total amount of postpetition arrearage disbursed by the trustee: | \$ _____ |
| d. Total amount of arrearages disbursed by the trustee: | \$ _____ |

Part 4: Postpetition Payments

Check one:

- ☐ Postpetition payments are made by the debtor.
- ☐ Postpetition payments are paid through the trustee.
- ☐ Other: _____

If the trustee has disbursed postpetition payments, complete a and b below; otherwise leave blank.

- a. Total amount of postpetition payments disbursed by the trustee as of date of notice: \$ _____
- b. The last ongoing mortgage payment disbursed by the trustee was the payment due on _____. All subsequent ongoing mortgage payments must be made directly by the debtor to the mortgage claimant.

Part 5: Postpetition Fees, Expenses, and Charges

Amount of postpetition fees, expenses, and charges disbursed by the trustee: \$ _____

Part 6: A Response Is Required by Bankruptcy Rule 3002.1(g)(3)

Within 28 days after service of this notice, the holder of the claim must file a response using Official Form 410C13-NR.

x

Signature

Date ____/____/____

Trustee

First Name Middle Name Last Name

Address

Number Street

City State ZIP Code

Contact phone (____) ____-____

Email _____