

KATHLEEN A. LEAVITT
Chapter 13 Bankruptcy Trustee, District of Nevada
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In Re: _____ Case Number: _____

Property Address: _____

PLEASE COMPLETE THE FOLLOWING INFORMATION FOR ONGOING MORTGAGE PAYMENTS CONNECTED WITH THE ABOVE ADDRESS, AND FAX THIS INFORMATION TO THE ABOVE NUMBER WITHIN 3 BUSINESS DAYS TO INSURE PROMPT PAYMENT OF ON-GOING MORTGAGE PAYMENTS.

Correct Creditor Name and Payment Address for on-going mortgage payments while in bankruptcy:

Creditor's Phone Number: _____

Contact Person for Account: _____

Attorney name: (if any) _____

Attorney address: _____

Attorney phone number: _____

Current Mortgage Account Number: _____

New Mortgage Account Number due to bankruptcy (if any): _____

Exact Amount of the Current Installment Payment From date of filing:

Principal & Interest:	\$ _____	Late Fees: \$ _____
Taxes	\$ _____	Grace Period of: _____ Days
Insurance:	\$ _____	
Mortgage Insurance Premium:	\$ _____	Estimated Ending Date _____
Other 1. _____	\$ _____	
2. _____	\$ _____	
<u>Grand Total:</u>	\$ _____	

Date Current Payment is Due: _____

Escrow account reviewed: Annually _____ Semi-annually _____ Next Scheduled Review _____

Type of Loan: Conventional _____ Adjustable Rate Mortgage _____ Balloon _____

If Adjustable: How often is it adjusted _____

When is the next scheduled adjustment date _____

Current Interest Rate: _____

When is the Balloon Payment due _____

Is the loan due in full and payable in less than 5 years? _____

If yes, date due: _____

Print name: _____

Title: _____

Company: _____

Signature:

Date: