

**KATHLEEN A. LEAVITT,
CHAPTER 13 BANKRUPTCY TRUSTEE**
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VERIFICATION OF ONGOING DIRECT PAYMENTS

Debtor(s) Name(s): _____ **Case No:** _____

Pursuant to Administrative Order 2013-04, the following information *MUST* be provided at least once every six (6) months while the bankruptcy case is pending. *This cover sheet must accompany all submissions of verification of ongoing direct payments.* Please mail, fax or email this cover sheet and the appropriate verification to the contact information above. It is also suggested that you provide a copy to your attorney's office.

DATE RANGE OF VERIFICATION: ___/___/____ - ___/___/____

REAL PROPERTY:

Creditor Name: _____

Property Address: _____

VEHICLE:

Creditor Name: _____

Property Description: _____

VERIFICATION ATTACHED: (check one)

You must attach verification for the 6 months immediately preceding the submission date. The Trustee reserves the right to request additional documentation if needed.

- Mortgage or Vehicle statement issued by creditor showing all payments made; or
- Bank statements with payments to creditor circled; or
- Canceled checks for the payments made to creditor; or
- Other: _____

I declare under penalty of perjury that I have made all ongoing payments in full directly to the Creditor listed above for the past six months as evidenced by the attached verification and that none of those payments have been reversed or otherwise returned.

Debtor Signature

Date

Joint Debtor Signature

Date