B100BX (Rev. 8/91) SUPPLEMENTAL BANKRUPTCY CLOSING REPORT

Forward this form to: Administrative Office of the United States Courts, Attn: Statistics Division—Bankruptcy, Washington, D.C. 20544	DIST. NO. 1	OFF. NO. 2	DOCKET NUMBER YR-NUMBER 3
	DATE PETITION FILED	REOPENED 4	CHECK IF APPLICABLE ◄ Joint Petition

DEBTOR

NAME OF DEBTOR (Last, First, Middle)	NAME OF JOINT DEBTOR
AKA/DBA	AKA/DBA
SS or EMPLOYEE ID	SS or EMPLOYEE ID
ADDRESS OF DEBTOR	ADDRESS OF JOINT DEBTOR

NAME OF COUNTY	COUNTY CODE	NAME OF JUDGE	JUDGE CODE 5	TRUSTEE CODE 6

DISPOSITION (CHECK ONE) 7		TERMINATED UNDER (CHECK ONE) 8			
	1. Discharge Granted				
	2. Discharge Denied		1. Ch. 7		9. Ch. 12
	3. Discharge Waived/Revoked				
	4. Discharge Not Applicable		4. Ch. 9		7. Ch. 13
	5. Petition Dismissed				
	6. Transferred to Another District		5. Ch. 11		8. Sec. 304

COMPLETE FOR CHAPTER 11 CASES ONLY

☐ 1 Plan Confirmed ☐ 2 Plan Not Confirmed 9	_____ % Dividend to Be Paid 10	☐ 1 Check box if future payments are contemplated under Chapter 11 Plan but percentage dividend is not determinable. 11

REPORT PREPARED BY (Name)	DATE REPORT PREPARED	DATE CASE CLOSED 12

13 $ _____

1. TOTAL RECEIPTS AND DISTRIBUTIONS
(Do not complete below if amount is zero)

FEES AND EXPENSES

$ _____ 2. Trustee Compensation

$ _____ 3. Fee for Attorney for Trustee

$ _____ 4. Other Professional Fees and All Expenses (Including Fee for Attorney for Debtor)

DISTRIBUTIONS

$ _____ 5. Secured Creditors

$ _____ 6. Priority Creditors

$ _____ 7. Unsecured Creditors

$ _____ 8. Equity Security Holders

$ _____ 9. Other Distributions (Including Payments to Debtor)

Distributions to include all payments to be made pursuant to confirmed plan.