

Adam M. Goodman
Chapter 13 Trustee
P.O. Box 1169
Denver, CO 80201
303-830-1971
FAX 303-830-1973
Attention: Susan

Date:_____

Re:
Chapter 13 Case #: _____
Debtor's Name: _____
Address: _____

Attorney for Debtor:
Name: _____
Address: _____

Telephone: (____) _____

Telephone: (____) _____

The above named debtor hereby requests that the monthly Chapter 13 payment of \$ _____ be made by payroll deduction from the pay checks of _____, husband / wife (please circle one), Social Security #XXX-XX-_____.

The Payroll Order generated by this request will be sent to your employer at the address below:

Employer Name: _____
Address: _____

Attention: _____

Employer telephone: (____) _____ Fax: (____) _____

I understand that I am responsible for making the plan payments until the payroll order takes effect. I also understand that if I change employment I must resume making all plan payments. I additionally understand that it is my responsibility to inform my employer and the trustee of any plan amendment which changes the amount of my monthly payment and **to independently make my bankruptcy plan payments whenever the need arises.** I further understand that if I want a payroll order issued from the court I must return this form to the Trustee. In addition, I acknowledge that my employer will determine when deductions are withheld from my payroll checks.

I hereby verify that I am requesting a payroll order as described above and agree with all the terms of this request.

Debtor