CSD 1805 [12/29/99]

Name, Address, Telephone No. & I.D. No.

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF CALIFORNIA
325 West "F" Street, San Diego, California 92101-6991

In Re

BANKRUPTCY NO.

Debtor.

APPLICATION TO PAY FILING FEES IN INSTALLMENTS

In accordance with Federal Rule of Bankruptcy Procedure 1006, application for permission to pay half the filing fee at this time and balance of the fee in not more than one installment due within 30 days of the date my petition is electronically filed (check one):

[ ] Chapter 7 payment of $100.00 [ ] Chapter 13 payment of $92.50
[ ] Chapter 11 payment of $415.00 [ ] Chapter 12 payment of $115.00

I certify that I am unable to pay the filing fee except in installments.

I further certify that I have not paid any money or transferred any property to an attorney for services in connection with this case or in connection with any other pending case and that I will neither make any payment nor transfer any property for services in connection with the case until the filing fee is paid in full.

I understand that entry of my discharge [or confirmation of any plan] will be delayed until the filing fee is paid in full or, if not paid, that my case will be dismissed.

Dated:

Signed:_____
Applicant

Signed:_____
Joint Applicant

DECLARATION BY ATTORNEY CONCERNING PAYMENT OF FILING FEES

I have not been paid any money nor accepted any transfer of property as payment for my services and will not do so until the fees have been paid in full. I further authorize the Clerk, U.S. Bankruptcy Court, to charge my credit card with half the Applicant's filing fee at this time and with the remaining balance in not less than 30 days from the date the petition is electronically filed. Should the Applicant(s) fail to submit the remaining fee to me prior to the deadline for paying the balance, I shall file my REQUEST TO STOP PAYMENT (Local Form CSD 1807) prior to the expiration of the deadline.

I have made the Applicant(s) aware that the case will be dismissed if the fee is not paid when due.

Dated:

_____
Attorney for Debtor(s)