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.

OBJECTION TO CLAIM AND NOTICE THEREOF

TO:

The [ ] Trustee [ ] Debtor [ ] Chapter 13 Trustee, except to the extent already paid by the Chapter 13 trustee, objects to the allowance of Court Claim No. _____, (or if no Court number assigned, Trustee Claim No._____) by _____, filed for $_____, on the grounds it:

[ ] Duplicates Claim No.___ filed by _____.

[ ] The claim was filed after the expiration of the last date to file claims.

[ ] Does not include an itemized statement of the account.

[ ] Does not include a copy of the underlying judgment.

[ ] Does not include a copy of the security agreement and evidence of perfection.

[ ] Does not include a copy of the writing upon which it is based.

[ ] Fails to assert grounds for priority.

For the following objections, attach and serve affidavits or declarations in accordance with Local Bankruptcy Rule 9013-2(a)(2):

[ ] Appears to include interest or charges accrued after the filing of this case on _____.

[ ] Other [State grounds and cite applicable Code section or case authority.]:

If you object to the proposed action:

1. **YOU ARE REQUIRED** to obtain a hearing date and time from the appropriate Courtroom Deputy for the judge assigned to your bankruptcy case. If a Chapter 7, 11, or 12 case, determine which deputy to call by looking at the Bankruptcy Case No. in the above caption of this notice. If the case number is followed by the letter:

-	M	-	call	(619) 557-6019	-	DEPARTMENT ONE (Room 218)
-	A	-	call	(619) 557-6594	-	DEPARTMENT TWO (Room 118)
-	H	-	call	(619) 557-6018	-	DEPARTMENT THREE (Room 129)
-	B	-	call	(619) 557-5157	-	DEPARTMENT FOUR (Room 328)

For ALL Chapter 13 cases, call (619) 557-5955.

[Continued on Page 2]

2. **WITHIN THIRTY (30)** [1] **DAYS FROM THE DATE OF SERVICE OF THIS MOTION**, you are further required to serve a copy of your DECLARATION IN OPPOSITION TO MOTION and separate REQUEST AND NOTICE OF HEARING [Local Form CSD 1184 [2]] upon the undersigned moving party, together with any opposing papers. The opposing declaration shall be signed and verified in the manner prescribed by Federal Rule of Bankruptcy Procedure 9011, and the declaration shall:

   a. identify the interest of the opposing party; and

   b. state, with particularity, the grounds for the opposition.

3. **YOU MUST** file the original and one copy of the Declaration and Request and Notice of Hearing with proof of service with the Clerk of the U.S. Bankruptcy Court at 325 West "F" Street, San Diego, California 92101-6991, no later than the next business day following the date of service.

IF YOU FAIL TO SERVE YOUR "DECLARATION IN OPPOSITION TO INTENDED ACTION" AND "REQUEST AND NOTICE OF HEARING" within the 30-day[1] period provided by this notice, NO HEARING SHALL TAKE PLACE, you shall lose your opportunity for hearing, and the debtor or trustee may proceed to take the intended action.

I hereby declare under penalty of perjury that the objection set forth above is true and correct to the best of my information and belief.

DATED: _____

Trustee [Debtor]

CERTIFICATE OF SERVICE

I, the undersigned whose address appears below, certify:

That I am, and at all times hereinafter mentioned was, more than 18 years of age;

That on _____ day of _____, I served a true copy of the within OBJECTION TO CLAIM AND NOTICE THEREOF by [describe here mode of service]

on the following persons [set forth name and address of each person served] and/or as checked below:

[ ] For Chpt. 7, 11, & 12 cases:

UNITED STATES TRUSTEE
Department of Justice
402 West Broadway, Suite 600
San Diego, CA 92101

[ ] For ODD numbered Chapter 13 cases:

THOMAS H. BILLINGSLEA, JR., TRUSTEE
530 "B" Street, Suite. 1500
San Diego, CA 92101

[ ] For EVEN numbered Chapter 13 cases:

DAVID L. SKELTON, TRUSTEE
600 “B” Street, Suite 2000
San Diego, CA 92101-4507

I certify under penalty of perjury that the foregoing is true and correct.

Executed on _____
(Date)

_____
(Typed Name and Signature)

_____
(Address)

_____
(City, State, ZIP Code)

[1]If you were served electronically or by mail, you have three (3) additional days to take the above-stated actions.
[2]You may obtain Local Form CSD 1184 from the Office of the Clerk of the U.S. Bankruptcy Court.