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

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| **UNITED STATES BANKRUPTCY COURT**  SOUTHERN DISTRICT OF CALIFORNIA  325 West F Street, San Diego, California 92101-6991 | | |  |
| In Re | | | BANKRUPTCY NO. |
| Tax I.D. (EIN)#: | /S.S.#:XXX-XX- | Debtor(s) |

# NOTICE OF HEARING AND MOTION FOR REVIEW AND CONDITIONAL APPROVAL OF INDIVIDUAL CHAPTER 11 COMBINED PLAN OF REORGANIZATION AND DISCLOSURE STATEMENT

TO ALL CREDITORS AND OTHER PARTIES IN INTEREST:

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|  | **You are hereby notified** that on |  | , at , |  | , in Department |  |
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Room      , of the Jacob Weinberger United States Courthouse, located at 325 West F Street, San Diego, California 92101-6991, there will be a hearing on Debtor’s Motion for Review and Conditional Approval of the Individual Chapter 11 Combined Plan of Reorganization and Disclosure Statement. The Debtor moves the court to grant conditional approval of the disclosures made in the enclosed document so that it may be sent to creditors for voting on or objection to Plan confirmation. Final approval of the Disclosure Statement will be considered at the confirmation hearing on Debtor’s Plan of Reorganization. Notice of the confirmation hearing will be sent at a later date.

Any opposition or other response to this Motion should be served upon the undersigned and the original of such papers with proof of service must be filed with the Clerk of the U.S. Bankruptcy Court at 325 West F St., San Diego, California 92101-6991, **not later than fourteen days from the date of service.1 Alternatively, any party may attend the hearing and present the Court with its oral comments in lieu of filing written comments by the deadline given.**

No party waives any right to object to the Plan or the Disclosure Statement or to vote based on its response or lack of response to this Motion.

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| DATED: |  |  |
|  |  | [Attorney for] Moving Party |

1Depending on how you were served, you may have additional time for response. See FRBP 9006.

# CERTIFICATE OF SERVICE

I, the undersigned whose address appears below, certify:

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

That on       day of      , I served a true copy of this Notice of Hearing and Motion for Review and Conditional Approval of Individual Chapter 11 Combined Plan of Reorganization and Disclosure Statement along with the Individual Chapter 11 Combined Plan of Reorganization and Disclosure Statement by the mode of service shown below:

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| 1. | | **To Be Served by the Court via Notice of Electronic Filing (“NEF”)**: | | | | | | | |
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|  | | Under controlling Local Bankruptcy Rules(s) (“LBR”), the document(s) listed above will be served by the | | | | | | | |
| court via NEF and hyperlink to the document. On | | | | | | |  | , I checked the CM/ECF docket for | |
| this bankruptcy case or adversary proceeding and determined that the following person(s) are on the Electronic Mail Notice List to receive NEF transmission at the e-mail address(es) indicated and/or as checked below: | | | | | | | | | |
|  | | | | | | | | | |
|  |  | | | | Attorney for Debtor (or Debtor), if required: | | | | |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  | | | | Chapter 7 Trustee: | | | |  | | | | | | | |  | | | | For Chapter 7, 11, & 12 cases: | |  | For Chapter 13 cases: | |  | |  | | UNITED STATES TRUSTEE  ustp.region15@usdoj.gov | |  | MICHAEL KOCH, TRUSTEE  mkoch@ch13.sdcoxmail.com | |  | | | | | | | |  | | UNITED STATES SECURITIES AND EXCHANGE COMMISSION  ATTN: Bankruptcy Counsel | | | | | |  | | All secured creditors and parties requesting special notice, specifically: | | | | | | | | | | | | | | |
| 2. | | **Served by United States Mail**: | | | | | | |
|  | |  | | | | | | |
|  | | On | |  | | , I served the following person(s) and/or entity(ies) at the last known address(es) | | |
| address(es) in this bankruptcy case or adversary proceeding by placing accurate copies in a sealed envelope in the United States Mail via 1) first class, postage prepaid or 2) certified mail with receipt number, addressed as follows: | | | | | | | | |
|  | | | Attorney for Debtor (or Debtor), if required: | | | | | |
|  | | | OFFICE OF THE UNITED STATES TRUSTEE  880 Front Street, Suite 3230  San Diego, CA 92101-8897 | | | | | |
|  | | | UNITED STATES SECURITIES AND EXCHANGE COMMISSION  ATTN: Bankruptcy Counsel  444 South Flower Street, Suite 900  Los Angeles, CA 90071-9591 | | | | | |
|  | | | All secured creditors and parties requesting special notice, specifically: | | | | | |

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| 3. | **Served by Personal Delivery, Facsimile Transmission, Overnight Delivery, or Electronic Mail**: | | | |
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|  | Under Fed.R.Civ.P.5 and controlling LBR, on | |  | , I served the following person(s) |
| and/or entity(ies) by personal delivery, or (for those who consented in writing to such service method), by facsimile  transmission, by overnight delivery and/or electronic mail as follows: | | | | |
|  | | Attorney for Debtor (or Debtor), if required: | | |
|  | | OFFICE OF THE UNITED STATES TRUSTEE  880 Front Street, Ste. 3230  San Diego, CA 92101-8897 | | |
|  | | UNITED STATES SECURITIES AND EXCHANGE COMMISSION  ATTN: Bankruptcy Counsel  444 South Flower Street, Suite 900  Los Angeles, CA 90071-9591 | | |
|  | | All secured creditors and parties requesting special notice, specifically: | | |

I declare under penalty of perjury under the laws of the United States of America that the statements made

in this proof of service are true and correct

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| Executed on |  |  |  |
|  | (Date) |  | (Typed Name and Signature) |
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|  |  |  | (Address) |
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|  |  |  |  |
|  |  |  | (City, State, ZIP Code) |