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   |  | | --- | |  | | Debtor(s) | | BANKRUPTCY NO. |

**NOTICE OF MODIFIED CHAPTER 13 PLAN   
FILED BEFORE CONFIRMATION**

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| TO: |

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|  | | Because Debtor(s) seek to modify their Chapter 13 Plan dated | | |  | | | | in a manner that might | | |
| adversely affect a party in interest, you are hereby notified that a confirmation hearing on Debtor(s) Modified Plan filed | | | | | | | | | | | |
| contemporaneously with this notice will be heard on | | | |  | | , at |  | .m., in Department No. | |  | , |
| Room |  | | of the Court. Any opposition or other response to the Modified Plan must be filed within 28 days and served | | | | | | | | |
| upon the Debtor(s) and counsel, and the Chapter 13 Trustee, with a proof of service filed with the Clerk of the Court. | | | | | | | | | | | |
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| **NOTE THAT THE CONTINUED HEARING ON CONFIRMATION OF THE MODIFIED PLAN DOES NOT**  **SERVE TO ALSO RESCHEDULE ANY MOTION TO DISMISS ON CALENDAR AT THE SAME TIME. THAT HEARING CAN ONLY BE CONTINUED IN ACCORDANCE WITH THE COURT’S LOCAL RULES.** | | | | | | | | | | | |

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| DATED: |  |  |
|  | |  |
|  | | [Attorney for] Debtor |

**If modifying the Chapter 13 Plan after confirmation per § 1329, use Local Form CSD 1149.**

**If modifying the Chapter 13 Plan before confirmation and where no party in interest is adversely affected,**

**use Local Form CSD 1331.**

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 the |  | day of |  | , I served a true copy of the within NOTICE OF MODIFIED |
| CHAPTER 13 PLAN FILED BEFORE CONFIRMATION on the following persons listed below by the mode of service shown below: | | | | | |
| below: | | | | | |

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| 1. | **To Be Served by the Court via Notice of Electronic Filing (“NEF”)**: | | | | | |
|  |  | | | | | |
|  | 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: | | | | |
|  | |  | |  |  | |
|  | | For Chapter 13 cases: | |  |  | |
|  | | MICHAEL KOCH, TRUSTEE  mkoch@ch13.sdcoxmail.com | |  |  | |

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| 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 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: | | |  | Debtor: |
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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 parties |
| 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: | |  | Debtor: | |
|  | | | | | |
|  | 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) |
|  | | | |
|  | | |  |
|  | | | (City, State, ZIP Code) |