## UNITED STATES BANKRUPTCY COURT <br> EASTERN DISTRICT OF CALIFORNIA

In re :

MONTH ENDED: $\qquad$ PETITION DATE:

## SUMMARY OF FINANCIAL STATUS

## 1. Supplemental Schedules

a. Total Funds on Hand (All Accounts)
b. Accounts Receivable (Pre \& Post-Petition)
c. Accounts Payable (Post-Petition)
d. Total Non-Cash Losses
e. Post-Petition Tax Liabilities

| End of Current Month |  | Prior Month | As of Petition Date |
| :---: | :---: | :---: | :---: |
| \$ | - |  |  |
| \$ | - |  |  |
| \$ | - |  | N/A |
| \$ | - |  |  |
| \$ | - |  | N/A |

2. Cash Receipts and Disbursements
a. Total Receipts
b. Total Disbursements
c. Excess (Deficiency) of Receipts over Disbursements
d. Cash Balance Beginning of Month
e. Cash Balance End of Month

## CASE NUMBER

CHAPTER 12 (FAMILY FARMER) MONTHLY OPERATING REPORT

## At the end of this Reporting Month:

3. Have you paid any pre-petition unsecured debt? (If yes, attach listing and indicate if such payments were approved by the court)
4 Have you sold any assets other than inventory this month?
(If yes, attach listing showing date sold, amount received and indicate if sale was approved by the court)
4. Did any insurance company cancel your policy this month? (If yes, attach listing showing date of cancellation)
5. Have you borrowed money from anyone this month? (If yes, attach listing showing date received, source of funds, and terms of repayment)
6. Have you paid your attorney or any other professional this month?
(If yes, attach listing showing date \& amount of payment)


I, (Name and title), declare under penalty of perjury that I have fully read and understood the foregoing debtor-inpossession monthly operating report and that the information contained herein is true and complete to the best of my knowledge.

Date: $\qquad$
Responsible Individual

## SUPPLEMENTAL INFORMATION

## SCHEDULE A: SUMMARY SCHEDULE OF CASH

Report on all accounts open at any point during the reporting period. All account types should be included (i.e.. checking, savings, money market, CDs, investment securities, petty cash, etc.)

|  | Account 1 | Account 2 | Account 3 | Account 4 | Account 5 |
| :--- | :--- | :--- | :--- | :--- | :--- |
| Bank Name |  |  |  |  |  |
| Account Purpose |  |  |  |  |  |
| Account No. |  |  |  |  |  |
| Month End Balance |  |  |  |  |  |

Total Funds on Hand for all Accounts

$$
\$ \quad-
$$

Attach copies of the month end statement(s) and reconciliation(s) to the Monthly Operating Reports.

SCHEDULE B: AGING OF ACCOUNTS RECEIVABLE (A/R) AND PAYABLE (A/P)

|  | A/R <br> (Pre \& post- <br> petition) | A/P <br> (Post- <br> Petition) |
| :--- | :---: | :---: |
| 30 days or less |  |  |
| 31-60 Days |  |  |
| $61-90$ days |  |  |
| $91+$ days |  |  |
| Totals | $\$ \quad-$ | $\$$ |

## SCHEDULE C: NON-CASH LOSSES

Loss due to crop failure of damage (itemize crops lost and cause)
$\qquad$
Estimated amount of loss:
Loss due to death or disease of livestock/poultry (Itemize livestock or poultry lost and cause)

|  |  |  |
| :--- | :--- | :---: |
|  | Estimated amount of loss: |  |
|  |  | $\$$ |

SCHEDULE D: STATUS OF PAYMENTS TO SECURED CREDITORS, LESSORS, AND OTHER PARTIES TO EXECUTORY CONTRACT

| Creditor, Lessor, etc. | Frequency of Payments (Mo., Qtr.) | Amount of Payment | Post-petition Payments Not Paid |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  | Number | Total Due |
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## SCHEDULE E: TAX LIABILITIES

| Tax Type | Post-Petition <br> Amt. Owing |
| :--- | :--- |
| Federal withholding |  |
|  |  |
| State Withholding |  |
| FICA - Employer's Share |  |
| FICA - Employee's Share |  |
| Federal Unemployment |  |
| State Unemployment |  |
| Sales and Use |  |
| Real Property | $\$$ |
| Other (specify) | - |
| Total |  |

## STATEMENT OF CASH RECEIPTS \& DISBURSEMENTS

(Report on a cash basis)

|  |  |  |  | onth | Cumulative (Case-to-Date) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Cash Receipts |  |  |  |  |  |
| FARM INCOME: List sales by kind (crop, livestock, etc.) |  |  |  |  |  |
| Kind Unit type | Qty. sold | \$ per unit |  |  |  |
| 1 |  |  | \$ | - |  |
| 2 |  |  | \$ | - |  |
| 3 |  |  | \$ | - |  |
| 4 |  |  | \$ | - |  |
| 5 |  |  | \$ | - |  |
| 6 |  |  | \$ | - |  |
| 7 |  |  | \$ | - |  |
| Miscellaneous Farm Income |  |  |  |  |  |
| 7 Contract Payments |  |  |  |  |  |
| 8 Pre-filing Accounts Receivables |  |  |  |  |  |
| 9 Rent Payments |  |  |  |  |  |
| 10 PIK and Roll Proceeds |  |  |  |  |  |
| 11 Custom Farming Income |  |  |  |  |  |
| 12 Custom Feeding Payments |  |  |  |  |  |
| 13 Other (specify source): |  |  |  |  |  |
| 14 |  |  |  |  |  |
| 15 |  |  |  |  |  |
| 16 TOTAL FARMING INCOME |  |  | \$ | - | \$ |
| WAGES FROM OUTSIDE WORK |  |  |  |  |  |
| 17 Debtor (describe source): |  |  |  |  |  |
| 18 Co-Debtor (describe source): |  |  |  |  |  |
| 19 TOTAL OUTSIDE WAGES |  |  | \$ | - | \$ |
| OTHER RECEIPTS |  |  |  |  |  |
| 20 Social Security |  |  |  |  |  |
| 21 Other (specify source): |  |  |  |  |  |
| 22 |  |  |  |  |  |
| 23 |  |  |  |  |  |
| 24 TOTAL OTHER RECEIPTS |  |  | \$ | - | \$ |
| 25 TOTAL CASH RECEIPTS |  |  | \$ | - | \$ |
| CASH DISBURSEMENTS |  |  |  |  |  |
| 26 HOUSEHOLD EXPENSES (attach detailed schedule) |  |  |  |  |  |
| 27 FARM EXPENSES (attach detailed schedule) |  |  |  |  |  |
| 28 TOTAL CASH DISBURSEMENTS |  |  | \$ | - | \$ |
| 29 Net Increase (Decrease) in Cash |  |  |  |  |  |
| 30 Cash Balance, Beginning of Period |  |  |  |  |  |
| 31 Cash Balance, End of Period |  |  |  |  |  |

## FARM EXPENSES/DISBURSEMENTS FOR THE CURRENT PERIOD

This schedule may be used to provide detailed support for the "Household Expenses" line item on the Statement of Cash Receipts and Disbursements. Upon approval of the Trustee, Debtor may use an internally generated check register.

| DATE | CHECK NUMBER | PAYEE | PURPOSE | AMOUNT |
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|  |  | Farm Exp | ) | \$ |

(Add additional pages as necessary to include all disbursements)

HOUSEHOLD EXPENSES/DISBURSEMENTS FOR THE CURRENT PERIOD
This schedule may be used to provide detailed support for the "Household Expenses" line item on the Statement of Cash Receipts and Disbursements. Upon approval of the Trustee, Debtor may use an internally generated check register.

| DATE | CHECK NUMBER | PAYEE | PURPOSE | AMOUNT |
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(Add additional pages as necessary to include all disbursements)

