Fill in this information to identify your case:								
Debtor 1	First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if filing)		Middle Name	Last Name					
United States E	Bankruptcy Court for the: _	District of						
Case number (If known)			_					

☐ Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/21

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11 (other than Subchapter V). If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

	s, write your name and case number (if known). Calculate Your Current Monthly Income	e		uuumo		ppilooi on allo top or c	, uuuniona			
What is your marital and filing status? Check one only.										
	Not married. Fill out Column A, lines 2-11.									
	☐ Married and your spouse is filing with you. Fill out	both Colum	nns A and B,	lines 2-1	l.					
	☐ Married and your spouse is NOT filing with you. F	ill out Colun	nn A, lines 2-	11.						
	Fill in the average monthly income that you received case. 11 U.S.C. § 101(10A). For example, if you are filing amount of your monthly income varied during the 6 mont Do not include any income amount more than once. For property in one column only. If you have nothing to report	g on Septem hs, add the i example, if b	nber 15, the 6 income for all poth spouses	i-month p I 6 month own the	eriod would be M s and divide the t same rental prop	larch 1 through August 3 otal by 6. Fill in the resu	31. If the It.			
					Column A Debtor 1	Column B Debtor 2				
2.	Your gross wages, salary, tips, bonuses, overtime, as payroll deductions).	e all	\$	\$						
3.	 Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 			f	\$	\$				
4.	All amounts from any source which are regularly paid you or your dependents, including child support. Incl an unmarried partner, members of your household, your roommates. Include regular contributions from a spouse Do not include payments you listed on line 3.	from d	\$	\$						
5.	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2							
	Gross receipts (before all deductions)	\$	\$							
	Ordinary and necessary operating expenses	- \$	- \$							
	Net monthly income from a business, profession, or farm	\$	\$	Copy here→	\$	\$				
6.	Net income from rental and other real property	Debtor 1	Debtor 2							
	Gross receipts (before all deductions)	\$	\$							
	Ordinary and necessary operating expenses	- \$	- \$							
	Net monthly income from rental or other real property	\$	\$	Copy here	\$	\$				

1 First Name Middle Name Last Name	Case number (if known)	
	Column A Debtor 1	Column B Debtor 2	
Interest, dividends, and royalties	\$. \$	
Unemployment compensation	\$	\$	
Do not enter the amount if you contend that the amount received was a be under the Social Security Act. Instead, list it here:	nefit		
For you\$	-		
For your spouse\$	_		
Pension or retirement income. Do not include any amount received that benefit under the Social Security Act. Also, except as stated in the next set do not include any compensation, pension, pay, annuity, or allowance paid United States Government in connection with a disability, combat-related in disability, or death of a member of the uniformed services. If you received a retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 title.	ntence, by the njury or any ne	\$	
D. Income from all other sources not listed above. Specify the source and Do not include any benefits received under the Social Security Act; paymer under the Federal law relating to the national emergency declared by the Funder the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect coronavirus disease 2019 (COVID-19); payments received as a victim of a crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United State Government in connection with a disability, combat-related injury or disability death of a member of the uniformed services. If necessary, list other source separate page and put the total below.	nts made President to the war es ty, or		
	\$	\$	
	\$	\$	
Total amounts from separate pages, if any.	+ \$	+ \$	
. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	+ \$	= \$
			Total current monthly inco
art 2: Sign Below			
By signing here, under penalty of perjury I declare that the information on the	is statement and in any attac	nments is true and corre	ct.
x x			

Date MM / DD / YYYY

Date_____MM / DD / YYYY