**UNITED STATES BANKRUPTCY COURT**

**DISTRICT OF VERMONT**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

In re:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Chapter 11**

**Debtor(s). Case # \_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Summary Ballot Report and Certification**

[*The Plan Proponent*], by and through its attorney [*name of attorney*] and hereby summarizes, reports, and certifies to the Court the results of the balloting on the [*Plan Proponent*]’s Chapter 11 Plan of Reorganization (hereinafter, the “Plan”), dated \_\_\_\_, and in making such report states as follows:

***Timely and Untimely Filed Ballots***

1. Of the [*number*] ballots issued, [*number*] ballots were filed.
2. Of the filed ballots, [*number*] were timely filed and [*number*] were untimely filed.
3. Of the timely filed ballots, [*number*] accepted the Plan and [*number*] rejected the Plan.

***Summary of Balloting by Class***

1. Class [*#*] [*name or identity of class*]:

This class is impaired, has voted upon the Plan, and [*ACCEPTS/REJECTS*] the Plan.

|  |  |  |
| --- | --- | --- |
| **Class [#]** | **Ballots** | **Claims in terms of $** |
| Total in class | [*# of ballots distributed*] | [*$ amount of allowed claims*] |
| # filed | [*# of ballots*] [*(% of tota*l)] | [*$ amount*] [*(% of total)*] |
| for Plan | [*# of ballots*] [*(% of total)*] | [*$ amount*] [*(% of total)*] |
| against Plan | [*# of ballots*] [*(% of total)*] | [*$ amount*] [*(% of total)*] |

1. Class [*#*] [*name or identity of class*]:

This class is impaired, has voted upon the Plan, and [*ACCEPTS/REJECTS*] the Plan.

|  |  |  |
| --- | --- | --- |
| **Class [#]** | **Ballots** | **Claims in terms of $** |
| Total in class | [*# of ballots distributed*] | [*$ amount of allowed claims*] |
| # filed | [*# of ballots*] [*(% of total)*] | [*$ amount*] [*(% of total)*] |
| for Plan | [*# of ballots*] [*(% of total)*] | [*$ amount*] [*(% of total)*] |
| against Plan | [*# of ballots*] [*(% of total)*] | [*$ amount*] [*(% of total)*] |

1. Class [#] [*name or identity of Class*]:

This class is impaired, has balloted upon the Plan, and [*ACCEPTS/REJECTS*] the Plan.

|  |  |  |
| --- | --- | --- |
| **Class [#]** | **Ballots** | **Claims in terms of $** |
| Total in class | [*# of ballots distributed*] | [*$ amount of allowed claims*] |
| # filed | [*# of ballots*] [*(% of total)*] | [*$ amount*] [*(% of total)*] |
| for Plan | [*# of ballots*] [*(% of total)*] | [*$ amount*] [*(% of total)*] |
| against Plan | [*# of ballots*] [*(% of total)*] | [*$ amount*] [*(% of total)*] |

[*Provide as many additional summary paragraphs as necessary*.]

***Certification***

I certify that the [Plan Proponent] retains the voted ballots and will, upon request of the Court, the debtor-in-possession, the case trustee (if any), and/or the U.S. Trustee, produce copies of all such ballots. I further certify that the above summary report is an accurate summary of all classes, all allowed claims, and all ballots voted, and that this summary complies with Vt. LBR 3018-3.

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Authorized Agent of Plan Proponent*

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name of signatory

Address

E-mail address

Telephone number