UNITED STATES BANKRUPTCY COURT DISTRICT OF VERMONT

In re: Modification of the Local Rules of Practice and Procedure in the U.S. Bankruptcy Court for the District of Vermont

TO CREATE LOCAL RULE 2015-1

SPECIFYING THE TYPE OF OPERATING REPORT CHAPTER 12 DEBTORS MUST FILE, AND ESTABLISH THE PROCEDURE FOR WAIVER OR MODIFICATION OF OPERATING REPORT REQUIREMENT STANDING ORDER # 20-07

After consultation with the 2019 Local Rules Task Force and the Vermont bankruptcy bar, the Court has determined it would be most efficient, and expedite determinations of feasibility and plan confirmation in chapter 12 cases, to require all chapter 12 debtors to file monthly operating reports, using the form promulgated by the United States Trustee (the "UST Ch 12 Op Rept Form"), with local form addenda addressing livestock inventory and accrued expenses in greater detail, unless the debtor (or other party in interest) shows good cause to either (a) waive the operating report requirement or (b) modify the content or frequency of the report required. Therefore, the Court is creating a new Local Rule to specify this requirement, and creating the following new local forms: (i) PDF and Excel versions of the UST Ch 12 Op Rept Form, (ii) PDF and Excel versions of two local addenda to the UST Ch 12 Op Rept Form, and (iii) a motion for a waiver or modification of the operating report requirement.

Thus, IT IS HEREBY ORDERED that the following Local Rule is enacted:

VT. LBR 2015-1. DEBTOR-IN-POSSESSION – DEBTORS' OPERATING ORDERS IN CHAPTER 12.

Every debtor who files a chapter 12 case shall be required to file monthly operating reports, commencing in the month following the filing of the petition, unless the debtor demonstrates good cause to waive or modify this requirement, within 7 days of the filing of the petition.

An Operating Order will be entered in every chapter 12 case, describing the debtor's duties generally, including the duty to file monthly operating reports and applicable local addenda, on Local Forms S-3, S-4, and S-5. A debtor may file a motion seeking a waiver of this requirement, or a modification of the content or frequency of the reports to be filed, using Local Form S-6.

Failure of a chapter 12 debtor to file complete and timely operating reports may constitute cause for dismissal of the case, under 11 U.S.C. § 1208.

IT IS FURTHER ORDERED that Chapter 12 debtors shall use the UST Ch 12 Op Rept Form with the new Local Form addenda for their operating reports, and use the new Local Form motion to waive or modify the operating report requirement, all of which are attached and posted on the Court's website.

IT IS FURTHER ORDERED this new Local Rule and the attached new Local Forms are effective upon entry of this Order.

February 25, 2020 Burlington, Vermont

Celle aBronn

Colleen A. Brown United States Bankruptcy Judge

Attached: New Vt. LB Form S-3, S-4, S-5, and S-6.

VTB Form S-3 2/20

CHAPTER 12 MONTHLY OPERATING REPORT

Month: Year:

l.

NAME OF DEBTOR: CASE NO:

MONTHLY CASH RECEIPTS AND DISBURSEMENTS

(Report on a cash basis, unless you keep financial records on an accrual basis)

CASH RECEIVED DURING MONTH (ITEMIZE):		
Item and Quantity Sold	Amount	\$0.00 \$0.00 \$0.00
New Loan received this month (if any):		\$0.00
Wages earned from outside work:		\$0.00
Other receipts:		\$0.00
TOTAL CASH RECEIPTS		\$0.00
EXPENSES PAID:		
Total amount paid for household or living expense:	\$	-
Operating Expenses Paid (itemize):	\$	-
ltem	\$ \$ \$ \$	51 50 51 51
Plan payments made to Chapter 12 Trustee	\$ \$	
TOTAL EXPENSES PAID DURING MONTH	\$	670
Losses due to crop failure or damage	\$ \$ \$	-
Losses due to death or disease of livestock or poultry SUBTOTAL	s s s	
PROFIT (OR LOSS) FOR MONTH	\$	~

HI.	CASH RECONCILIATION:		
	Cash and Bank Accounts Balance at Beginning of Month:	\$	
	Income (or Loss) During Month:	\$	-
	Cash and Bank Account Balance at End of Month:	Ş	
IV.	EXPENSES CHARGED BUT NOT PAID DURING MON	ITH (ITEMIZE):	

Expense:

Amount:

I CERTIFY UNDER PENALTY OF PERJURY THAT I HAVE READ THE FOREGOING STATEMENT, AND IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

DATE

DEBTOR/OFFICER OF DEBTOR

TAX DEPOSIT STATEMENT

Month: Year: NAME OF DEBTOR: CASE NO: SUMMARY FEDERAL WITHHOLDING TAX			
	Beginning Withholding Tax Payable	\$	-
	Withheld or Accrued	s	-
		+	
	Disbursements to Tax Account	\$	940) Sec
	Ending Withholding Tax Payable	\$	-
STATE WITHHOLDING TAX			
	Beginning Withholding Tax Payable Withheld or Accrued	\$	-
	Disbursements to Tax Account and/or check	\$	0

Deposit Receipt and/or check numbers

	Ending Withholding Tax Payable	\$	20
FICA WITHHOLDING TAX (includ	de both employer and employee share:		
	Beginning FICA Tax Payable	\$	(E)
	Withheld or Accrued	\$	-
	Disbursements to Tax Account	\$	(L))
	Deposit Receipt and/or check numbers		
	Ending FICA Tax Payable	\$	0
SALES TAX			
	Beginning Sales Tax Payable New Sales Tax Payable	\$ \$	0 0
	Disbursements to Tax Account	\$	10
	Deposit Receipt and/or check numbers		
	Ending Sales Tax Payable	\$	ā.

I CERTIFY UNDER PENALTY OF PERJURY THAT I HAVE READ THE FOREGOING STATEMENT, AND IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DATE

Sign: Print Name: DEBTOR/OFFICER OF THE DEBTOR

TAX DEPOSIT STATEMENT

Month: Year: NAME OF DEBTOR: CASE NO:

FEDERAL WITHHOLDING TAX		
	Beginning Withholding Tax Payable	\$
	Withheld or Accrued	\$ -
	Disbursements to Tax Account	\$ ¥1

	Ending Withholding Tax Payable	\$	120
STATE WITHHOLDING TAX			
	Beginning Withholding Tax Payable Withheld or Accrued	\$	-
	Disbursements to Tax Account	\$	0
	Deposit Receipt and/or check numbers		
	Ending Withholding Tax Payable	\$	<i></i> (
FICA WITHHOLDING TAX (inclu	de both employer and employee share:		
	Beginning FICA Tax Payable	\$	Ш);
	Withheld or Accrued	\$	-
	Disbursements to Tax Account	\$	-
	Deposit Receipt and/or check numbers		
	Ending FICA Tax Payable	Ş	201
SALES TAX			
	Beginning Sales Tax Payable New Sales Tax Payable	\$ \$	20 30
	Disbursements to Tax Account	\$	-
	Deposit Receipt and/or check numbers		
	Ending Sales Tax Payable	\$	

I CERTIFY UNDER PENALTY OF PERJURY THAT I HAVE READ THE FOREGOING STATEMENT, AND IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

DATE DEBTOR/OFFICER OF THE DEBTOR

Sign: Print Name: _____

UNITED STATES BANKRUPTCY COURT

DISTRICT OF VERMONT

In Re: Chapter 12 Debtor Name: Case No.:

Month: Year:

INDIVIDUAL CHAPTER 12 REPORT OF CURRENT INCOME AND CURRENT EXPENDITURES

Complete this form by giving the amount of money received each month or expenses each month and by answering each of the other questions. If your answer is "none" or "not applicable", so state.

1. Debtor's marital status is: The name of the debtor's spouse is:

2. The name, relationship and age of the debtor's dependents other than spouse are:

a. b. c. d.

3. Employment and Occupation

a.	Debtor is employed by:
	as a:
b.	Debtor is self-employed and the debtor's place of business is

d.

c.

a.

Spouse is employed by:
as a:
Spouse is self-employed and the spouse's place of business is:

4. Income

Debtor, give your current monthly income.	
1. Take-home pay Calculated as follows:	
(a) Gross wages, salary, or commissions	\$ -
LESS	
(b) Payroll taxes (including Social Security)	\$ 20
(c) Insurance	\$ æ
(d) Union Dues	\$

(e) Other (specify)	\$ -
2. Regular income from operation of business or profession	\$ -
3. Social Security	\$ (m)
4. Pension and other retirement income	\$ 100
5. Income from ownership of real or personal property	\$
6. Investment income (interest and dividends)	\$ 23
7. Alimony or support payable to the debtor for the debtor's use	\$ ~
8. Support payable to the debtor for the support of another (specify for whom)	\$

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Money provided by debtor's spouse to the debtor (exclude amounts listed in (8))	\$ ~
Other monthly incomes (specify)	
(a)	\$ ~
(b)	\$ ~
(c)	\$
TOTAL	\$ -

b.

Spouse, give the current monthly of your spouse.

1. Spouse's take-home pay	\$
 Total of all other income received by your spouse (include all sources of income listed in 4a(2) 	\$ æ
through 4a(10) TOTAL	\$ -

5 Expenses, give current monthly expenses of debtor or family. (Exclude payments on debts owed as of the date you filed a case under the Bankruptcy Code, unless, the debt is specifically listed below).

Home mortgage	\$ 0
a. amount of mortgage payment used for taxes or insurance	\$ -
Routine home maintenance	\$ 200

Rent (include condominium fee or lot rental for trailer)	\$	(71)
Utilities:	Ş	-20
a. electricity	\$	-
b. heat	\$	-
c. water	Ş	~
d. telephone	\$	
e. other	\$	-
5. Food	\$	-
6. Clothing	\$	-
7. Laundry and cleaning	\$	-
8. Newspapers, periodicals and books	\$	-
(including school books)		
9. Medical, dental and drug expenses	\$	-
10. Insurance (not deducted from wages)	\$	c)
a. auto	\$	ωı
b. life	\$	1910
c. medical	\$	
d. homeowners or renters	\$	-
e. other	\$	-20
11. Transportation (not including auto payments)	\$	-
12. Recreation	\$	

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13. Dues, union, professional, social or otherwise (not deducted from wages)	\$
14. Taxes (not deducted from wages or included in mortgage pa	\$
15. Alimony, maintenance or support payments	\$
16. Other payments for support of dependents not living at home	\$

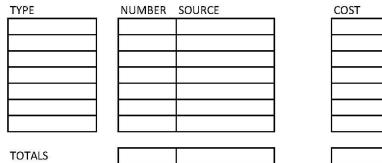
Total Expenses	\$	R.	
Total Income	\$		
TOTAL		\$	
	c. other	\$	
	b. home improvement	\$	
	a. auto	\$	
	19. Installment Payments		
	TOTAL	\$	
	18. Other (explain)	\$	
	17. Religious and other charitable	\$	

\$

Surplus (deficiency)

	U.S. BANKRUPTCY COURT DISTRICT OF VERMONT					
	CHAPTER 12 MONTHLY LIVESTOCK TOTALS REPORT					
	CASE NAME:					
	CASE NUMBER					
	REPORT FOR N	10NTH OF:	······································			
TOTALS FOR		BEGINNING OF MONTH	END OF MONTH			
BULLS						
DRY COWS						
MILKING COWS						
PREGNANT COV	VS					
OPEN HEIFERS						
BRED HEIFERS						
CALVES						
OTHER (specify)						
o men (specify)						
TOTALS						

ANIMALS ADDED THIS MONTH

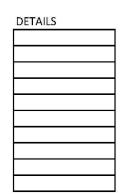




11

ANIMALS LOST/CULLED/SOLD THIS MONTH

TYPE	NUMBER	LOST/CULLED/SOLD



TOTALS

VTB Form S-5 2/20

VERMONT CHAPTER 12 OPERATING REPORT ADDENDUM

ENCLOSURE 2.1 (TO BE USED IN LIEU OF ENCLOSURE 2 ITEM IV)

CASE NO.	
CASE NAME:	
MONTH OF	

EXPENSES CHARGED OR ACCRUED, BUT NOT PAID DURING THE MONTH

DATE	VENDOR	DESCRIPTION	AMOUNT

		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
	TOTAL	\$	-

POST-PETITON EXPENSES CHARGED OR ACCRUED IN A PRIOR MONTH, STILL UNPAID

VENDOR	DESCRIPTION	AMOUNT	
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
		\$	-
	TOTAL	\$	-

UNITED STATES BANKRUPTCY COURT DISTRICT OF VERMONT

In re:

Debtor(s).

Case # xx-xxxxx Chapter 12

Motion to Waive or Modify Chapter 12 Debtor's Obligation to File Operating Reports

Pursuant to Vt. LBR 2015-1, chapter 12 debtors must file monthly operating reports, using the Vt. LB Form S-3, S-4, and S-5, as applicable, unless the Court grants the debtor a waiver of this requirement or modifies the content or frequency of the reports the debtor must file.

The Debtor in this case seeks (check one):

a waiver of the requirement to file operating reports.

_____ modification of the content / form of the operating report the Debtor must file, as follows:

____ modification of the duty to file reports monthly, requesting reports be due ___ quarterly /___ annually. In support of this request, the Debtor states:

- 1. _____
- 2. ____
- 3. ____
- 4.

The chapter 12 trustee and the Debtor's primary creditors [*named here*] will be filing consent to this Motion, and if they do not do so within seven (7) days of the filing of this Motion, the Debtor will file a notice of motion setting a hearing on this Motion, on 14 days' notice to the trustee and all secured and priority unsecured creditors listed in the debtor's bankruptcy schedules, and any attorneys who have filed a notice of appearance.

The Debtor understands if the Court grants this request, the relief may be revoked, and the requirement reinstated, on a showing of good cause (e.g., a change in the debtor's circumstances, a determination the affirmations in this Motion are incomplete or misleading, or the need for closer monitoring of the debtor's financial circumstances).

Dated: _____, 20___

Attorney for Debtor(s) [Name, address, tel #, email]