

**AMENDED**

12-30-99

Allison A. Larsen-Helton

99-02605

In re \_\_\_\_\_  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE		
	NAMES	AGE	RELATIONSHIP
Single	John P. Helton	8	son
<b>EMPLOYMENT:</b>	<b>DEBTOR</b>	<b>SPOUSE</b>	
Occupation	Secretary		
Name of Employer	Allstate		
How long employed	2 months		
Address of Employer	803 Beacon Street Boise, ID 83706		

Income: (Estimate of average monthly income)  
Current monthly gross wages, salary, and commissions  
(pro rate if not paid monthly.)  
Estimated monthly overtime

	DEBTOR	SPOUSE
\$	546.00	N.A.
\$	0.00	N.A.
<b>\$</b>	<b>546.00</b>	<b>N.A.</b>

SUBTOTAL

LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
- b. Insurance
- c. Union dues
- d. Other (Specify) \_\_\_\_\_

\$	47.40	N.A.
\$	0.00	N.A.
\$	0.00	N.A.
\$	0.00	N.A.

SUBTOTAL OF PAYROLL DEDUCTIONS

\$	47.40	N.A.
<b>\$</b>	<b>498.60</b>	<b>N.A.</b>

TOTAL NET MONTHLY TAKE HOME PAY

\$	0.00	N.A.
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Regular income from operation of business or profession or farm  
(attach detailed statement)

\$	0.00	N.A.
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Income from real property

\$	0.00	N.A.
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Interest and dividends

\$	300.00	N.A.
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Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

\$	435.00	N.A.
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Social security or other government assistance  
(Specify) Social Security for son

\$	0.00	N.A.
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Pension or retirement income

\$	0.00	N.A.
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Other monthly income

\$	0.00	N.A.
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(Specify) \_\_\_\_\_

\$	0.00	N.A.
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\$	0.00	N.A.
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TOTAL MONTHLY INCOME

<b>\$</b>	<b>1,233.60</b>	<b>N.A.</b>
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TOTAL COMBINED MONTHLY INCOME \$ 1,233.60

(Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

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In re \_\_\_\_\_, Debtor

Case No. 99-02605  
(If known)

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTORS**

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)		\$	350.00
Are real estate taxes included?	Yes _____ No <u>✓</u>		
Is property insurance included?	Yes _____ No <u>✓</u>		
Utilities		\$	0.00
Electricity and heating fuel		\$	0.00
Water and sewer		\$	60.00
Telephone		\$	0.00
Other _____		\$	0.00
Home maintenance (Repairs and upkeep)		\$	0.00
Food		\$	258.60
Clothing		\$	70.00
Laundry and dry cleaning		\$	10.00
Medical and dental expenses		\$	45.00
Transportation (not including car payments)		\$	115.00
Recreation, clubs and entertainment, newspapers, magazines, etc.		\$	90.00
Charitable contributions		\$	0.00
Insurance (not deducted from wages or included in home mortgage payments)		\$	0.00
Homeowner's or renter's		\$	0.00
Life		\$	175.00
Health		\$	0.00
Auto		\$	0.00
Other _____		\$	0.00
Taxes (not deducted from wages or included in home mortgage payments)		\$	0.00
(Specify) _____		\$	0.00
Installment payments (In chapter 12 and 13 cases, do not list payments to be included in the plan)		\$	0.00
Auto		\$	0.00
Other _____		\$	0.00
Other _____		\$	0.00
Alimony, maintenance, and support paid to others		\$	0.00
Payments for support of additional dependents not living at your home		\$	0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$	0.00
Other _____ Personal Care		\$	60.00

TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules) \$ 1,233.60

**(FOR CHAPTER 12 AND 13 DEBTORS ONLY)**

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income		\$	1,233.60
B. Total projected monthly expenses		\$	1,233.60
C. Excess income (A minus B)		\$	0.00
D. Total amount to be paid into plan each _____ monthly		\$	0.00
	(interval)		

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# United States Bankruptcy Court

Region 18 District of Idaho

Allison A. Larsen-Helton

In re \_\_\_\_\_  
Debtor

Case No. 99-02605  
\_\_\_\_\_  
(If known)

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	AMOUNTS SCHEDULED		
			ASSETS	LIABILITIES	OTHER
A - Real Property	NO	0	\$ 0.00		
B - Personal Property	NO	0	\$ 0.00		
C - Property Claimed As Exempt	NO	0			
D - Creditors Holding Secured Claims	NO	0		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims	NO	0		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	NO	0		\$ 0.00	
G - Executory Contracts and Unexpired Leases	NO	0			
H - Codebtors	NO	0			
I - Current Income of Individual Debtor(s)	YES	1			\$ 1,233.60
J - Current Expenditures of Individual Debtor(s)	YES	1			\$ 1,233.60
Total Number of Sheets in ALL Schedules ▶		2			
Total Assets ▶			0.00		
Total Liabilities ▶				0.00	