UNITED STATES BANKRUPTCY COURT

EASTERN DISTRICT OF MISSOURI

\_\_\_\_\_\_\_\_\_\_\_\_DIVISION

In re DEBTOR NAME )

) Case No. \_\_\_- \_\_\_\_\_\_\_ - \_\_\_

) Chapter \_\_\_\_

Debtor(s). )

**EXHIBIT SUMMARY**

Pursuant to the Local Rules of Bankruptcy Procedure, the following exhibits are referenced in support of \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*the motion, pleading, or claim to be filed*). Copies of these exhibits will be provided as required by Local Rules:

1 ..............................

2 ..............................

3 ..............................

/s/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Attorney Name, Fed. & State Bar #

Attorney for Movant/Debtor

Address

City, State, Zip Code

Phone: Fax:

e-mail:

*(The Exhibit Summary is to be attached to and filed with the motion, pleading, or claim to which it relates. Pursuant to L.R. 9040 (L.B.R. 9040-1 for cases filed before June 5, 2008), the Exhibit Summary shall describe the exhibits in sufficient detail to permit the Court and parties to evaluate the factual elements relevant to the motion, pleading, or claim. The description shall include the following, when applicable:*

basis for the debt, including date;

balance of the indebtedness; and

date and manner of perfection, including book and page number, certificate of title, or UCC-1 recording.

*If exhibit(s) is/are two pages or less in length, the exhibit(s) may be filed in place of an*

*Exhibit Summary.)*

**CERTIFICATE OF SERVICE**

I certify that a true and correct copy of the foregoing document was filed electronically on the \_\_ day of \_\_\_\_ 20\_\_, with the United States Bankruptcy Court, and has been served on the parties in interest via e-mail by the Court's CM/ECF System as listed on the Court's Electronic Mail Notice List.

I certify that a true and correct copy of the foregoing document was filed electronically with the United States Bankruptcy Court, and has been served by Regular United States Mail Service, first class, postage fully pre-paid, addressed to to the parties listed below on the \_\_\_ day of \_\_\_\_\_\_\_, 20\_\_.

/s/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attorney Name, Fed. & State Bar #

Attorney for Movant/Debtor

Address

City, State, Zip Code

Phone: Fax:

e-mail