Fill in this information to identify	your case:				
B.1. 4					
Debtor 1 First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		District of			
Case number				Check if	this is:
(If known)				☐ An an	nended filing
					plement showing post-petition er 13 income as of the following date:
Official Form B 6I				MM / D	D/YYYY
Schedule I: You	ır Income				12/13
supplying correct information. If yo	ou are married and not filingse is not filingse is not filing with you, do top of any additional page	g jointly, and you o not include info	ır spot ormatio	use is living with on about your spo	or 2), both are equally responsible for you, include information about your spouse ouse. If more space is needed, attach a known). Answer every question.
Fill in your employment		.			
information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employed	ed		☐ Employed☐ Not employed
Include part-time, seasonal, or self-employed work.					
Occupation may Include student or homemaker, if it applies.	Occupation				
	Employer's name				
	Employer's address	Number Street			Number Street
		- Circle			Transcr Creek
		City	State	ZIP Code	City State ZIP Code
	How long employed there	•	State	ZIP Code	City State ZIP Code
Part 2: Give Details About	Monthly Income				
spouse unless you are separated			_	-	write \$0 in the space. Include your non-filing
If you or your non-filing spouse had below. If you need more space, at			mation	for all employers	for that person on the lines
				For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	\$
3. Estimate and list monthly over	time pay.		3. +	-\$	+ \$
4. Calculate gross income. Add lin	ne 2 + line 3.		4.	\$	\$

First Name	Middle Name	Last Name	

		For Debtor 1	For Debtor non-filing s	
Copy line 4 here	4.	\$	\$	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$	\$	
5b. Mandatory contributions for retirement plans	5b.	\$		
5c. Voluntary contributions for retirement plans	5c.	\$		
5d. Required repayments of retirement fund loans	5d.	\$		
5e. Insurance	5e.	\$	\$	
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify:	5h.	+\$	_ + \$	
6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	_ \$	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		\$	_ \$	
monthly net income. 8b. Interest and dividends	8a. 8b.	\$	_	
Record and dividends Sc. Family support payments that you, a non-filing spouse, or a dependence regularly receive		Φ	_ Ψ	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive				
Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	ce	\$	_ \$	
Specify:	8f.			
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify:	8h.	+\$	+\$	
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	+ \$	= \$
11. State all other regular contributions to the expenses that you list in Sched	lule .	 I.	<u></u>	
Include contributions from an unmarried partner, members of your household, y other friends or relatives.			ommates, and	
Do not include any amounts already included in lines 2-10 or amounts that are it	not a	vailable to pay exp	enses listed in <i>Scl</i>	nedule J.
Specify:				11. + \$
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Ce			•	
13. Do you expect an increase or decrease within the year after you file this f	orm?	,		Combined monthly income
☐ No. ☐ Yes. Explain:				