

UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF RHODE ISLAND

(Revised 12/1/09)

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In re: :

Debtor(s) : BK No.

: Chapter

: *

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CHAPTER 11 CONFIRMATION WORKSHEET AND CERTIFICATION

I. GENERAL PLAN INFORMATION

Date of Bankruptcy Filing: _____

Date of Hearing on Confirmation: _____

Effective Date of Plan: _____

Method/Type of Plan Funding: _____

Projections attached for life of plan (if appropriate)

YES _____ NO _____

Summary of cash flow statements for the life of the Ch. 11 plan (included)

YES _____ NO _____

Amount required to Fund Plan: _____

Total initial Deposit required at Confirm: _____

Number of Creditor Classes: _____

Classes that are impaired under the Plan: _____

Indicate whether the Debtor intends to seek cramdown of the Plan:

YES _____ NO _____

Indicate whether any equity shareholders will be retaining any interest under the Plan:

YES _____ NO _____

Liquidation analysis included:

YES _____ NO _____

II. FILING OF REQUIRED DOCUMENTS

1. PROOF OF DEPOSIT is attached to worksheet: YES _____ NO _____

If NO, the required Proof of Deposit MUST be filed at least 7 days prior to the hearing on confirmation, or such hearing will be automatically vacated. *See*, R.I. LBR 3020-1(b). Do not issue a check to the Court. A copy of the bank statement showing the amount on deposit in accordance with Fed. R. Bankr. P. 3020(a) will suffice. The amount of the deposit must be equal to the initial distribution for all classes on the effective date of the plan.

2. CLAIMS REGISTER is attached to worksheet: YES _____ NO _____

3. PROPOSED ORDER OF DISTRIBUTION (R.I. Bankr. Form K.1) is attached to worksheet and has been mailed to all creditors, or the NOTICE OF FILING OF PROPOSED ORDER OF DISTRIBUTION (R.I. Bankr. Form K.2) in accordance with R.I. LBR 3020-1(a)(2) at least fourteen (14) days before the hearing on confirmation:

YES _____ NO _____

4. WRITTEN SUMMARY OF BALLOTS (R.I. Bankr. Form I) in accordance with R.I. LBRs 3018-1 and 3020-1 is attached to worksheet:

YES _____ NO _____

5. AFFIDAVIT RELATING TO REQUIREMENTS UNDER 11 U.S.C. §1129 is attached to worksheet. *See* R.I. LBR 3020-1(a)(6):

YES _____ NO _____

6. CERTIFICATE OF SERVICE has been filed or is attached to worksheet certifying that the approved Disclosure Statement, latest Amended Plan, the Order approving the Disclosure Statement, and the Ballots for Acceptances or Rejections were mailed to all creditors at least twenty-eight (28) days before the hearing on confirmation, or the date set by the Court:

YES _____ NO _____

III. BREAKDOWN OF PLAN OF REORGANIZATION PER CLASS

A. Administrative Expenses/Applications for Compensation:

TOTAL OF ADMIN. EXPENSES: _____*

Payment for admin. claims will be _____ percent (%).

Payment for admin. claims will be made on _____

Amount of deposit for admin. claims on eff. date: _____

*NOTE: See breakdown of claimants as set forth in the debtor's proposed order of distribution.

B. CLASS I

TOTAL OF CLASS I CLAIMS: _____*

Payment for class I will be _____ percent (%).

Payment for class I will be made on _____

Amount of deposit for class I claims on eff. date: _____

*NOTE: See breakdown of claimants as set forth in the debtor's proposed order of distribution.

C. CLASS II

TOTAL OF CLASS II CLAIMS: _____*

Payment for class II will be _____ percent (%).

Payment for class II will be made on: _____

Amount of deposit for class II claims on eff. date _____

*NOTE See breakdown of claimants as set forth in the debtor's proposed order of distribution.

D. CLASS III

TOTAL OF CLASS III CLAIMS:_____*

Payment for class III will be _____ percent (%).

Payment for class III will be made on_____

Amount of deposit for class III claims on eff. date _____

*NOTE See breakdown of claimants as set forth in the debtor's proposed order of distribution.

E. CLASS IV

TOTAL OF CLASS IV CLAIMS:_____*

Payment for class IV will be _____ percent (%).

Payment for class IV will be made on_____

Amount of deposit for class IV claims on eff. date _____

*NOTE See breakdown of claimants as set forth in the debtor's proposed order of distribution.

F. CLASS V

TOTAL OF CLASS V CLAIMS:_____*

Payment for class V will be _____ percent (%).

Payment for class V will be made on:_____

Amount of deposit for class V claims on eff. date _____

*NOTE See breakdown of claimants as set forth in the debtor's proposed order of distribution.

G. CLASS VI

TOTAL OF CLASS VI CLAIMS: _____ *

Payment for class VI will be _____ percent (%).

Payment for class VI will be made on: _____

Amount of deposit for class VI claims on eff. date _____

*NOTE See breakdown of claimants as set forth in the debtor's proposed order of distribution.

If there are more than six classes of creditors, extra pages should be included describing the breakdown of each additional class.

CERTIFICATION

I certify that I have reviewed the plan of reorganization, the claims register, the schedules filed in this case, and all other related documents, and that based upon such review, the above information is complete and accurate to the best of my knowledge.

DATED:

Attorney for the Debtor
Address:

Telephone Number:
Bar Code Number: