**Fill in this information to identify your case:**

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

(If known)

Official Form 427

**Cover Sheet for Reaffirmation Agreement 12/15**

**Anyone who is a party to a reaffirmation agreement may fill out and file this form. Fill it out completely, attach it to the reaffirmation agreement, and file the documents within the time set under Bankruptcy Rule 4008.**

|  |  |
| --- | --- |
| **Part 1:** | **Explain the Repayment Terms of the Reaffirmation Agreement** |
| 1. **Who is the creditor?**Name of the creditor |
| 2. **How much is the debt?** On the date that the bankruptcy case is filed $ To be paid under the reaffirmation agreement $ $ per month for months (if fixed interest rate) |
| 3. **What is the Annual** Before the bankruptcy case was filed %**Percentage Rate (APR)****of interest? (See****Bankruptcy Code** Under the reaffirmation agreement %  Fixed rate**§ 524(k)(3)(E).)**  Adjustable rate |
| 4. **Does collateral secure****the debt?**  No Yes. Describe the collateral. Current market value $  |
| 5. **Does the creditor assert**  No**that the debt is****nondischargeable?**  Yes. Attach an explanation of the nature of the debt and the basis for contending that the debt is nondischargeable. |
| 6. **Using information from*****Schedule I: Your Income*** | **Income and expenses reported on Schedules I and J** | **Income and expenses stated on the reaffirmation agreement** |
| (Official Form 106I) **and*****Schedule J: Your*** 6a. Combined monthly income from $ ***Expenses*** (Official Form line 12 of Schedule I106J)**, fill in the amounts.**6b. Monthly expenses from line 22c of – $ Schedule J6c. Monthly payments on all – $ reaffirmed debts not listed onSchedule J6d. **Scheduled net monthly income** $ Subtract lines 6b and 6c from 6a.If the total is less than 0, put the number in brackets. | 6e. Monthly income from all sources $ after payroll deductions6f. Monthly expenses – $ 6g. Monthly payments on all – $ reaffirmed debts not included inmonthly expenses6h. **Present net monthly income** $ Subtract lines 6f and 6g from 6e.If the total is less than 0, put the number in brackets. |

Official Form 427 **Cover Sheet for Reaffirmation Agreement** page 1

Debtor 1

First Name Middle Name Last Name

Case number (*if known*)

7. **Are the income amounts on lines 6a and 6e different?**

 No

 Yes. Explain why they are different and complete line 10.

8. **Are the expense amounts on lines 6b and 6f different?**

 No

 Yes. Explain why they are different and complete line 10.

9. **Is the net monthly income in line 6h less than 0?**

 No

 Yes. A presumption of hardship arises (unless the creditor is a credit union).

Explain how the debtor will make monthly payments on the reaffirmed debt and pay other living expenses. Complete line 10.

10. **Debtor’s certification about lines 7-9**

I certify that each explanation on lines 7-9 is true and correct.

If any answer on lines 7-9 is *Yes*, the debtor must sign here.

If all the answers on lines 7-9 are *No*, go to line 11.



Signature of Debtor 1



Signature of Debtor 2 (Spouse Only in a Joint Case)

11. **Did an attorney represent the debtor in negotiating the reaffirmation agreement?**

 No

 Yes. Has the attorney executed a declaration or an affidavit to support the reaffirmation agreement?

 No

 Yes

**Part 2: Sign Here**

**Whoever fills out this form must sign here.**

**I certify that the attached agreement is a true and correct copy of the reaffirmation agreement between the parties identified on this *Cover Sheet for Reaffirmation Agreement*.**

 Date

Signature MM / DD / YYYY

Printed Name

Check one:

 Debtor or Debtor’s Attorney

 Creditor or Creditor’s Attorney

Official Form 427 **Cover Sheet for Reaffirmation Agreement** page 2