

Filer's Name, Address, Phone, Fax, Email:



UNITED STATES BANKRUPTCY COURT
DISTRICT OF HAWAII
1132 Bishop Street, Suite 250
Honolulu, Hawaii 96813

hib_2016-1g3A (12/09)

Debtor:

Case No.:

Joint Debtor:
(if any)

Chapter 13

SUPPLEMENTAL DISCLOSURE OF COMPENSATION BY ATTORNEY FOR CHAPTER 13 DEBTOR

Use this form for compensation paid directly by debtor or another source. If being paid by the trustee through the plan, complete and file a Request for Payment of Administrative Expense: Compensation for Debtor's Attorney in Chapter 13 Case [hib_3070-2a2].

Pursuant to 11 U.S.C. § 329(a), Fed. R. Bankr. P. 2016(b), and LBR 2016-1(g), I make this supplemental disclosure of compensation paid to me as the attorney for the above-named Debtor(s). The initial amount of compensation was allowed in accordance with the Chapter 13 Attorney Fee Guidelines ("Guidelines") of this court. As authorized by the Guidelines, I have received or have agreed to accept directly from the Debtor(s) or another party additional compensation for certain post-confirmation services. The payment does not exceed the amounts specified in the Guidelines.

Amount of compensation being disclosed: \$

The source of the compensation paid or to be paid to me is:

Debtor(s)

Other: _____

In return for the above-disclosed compensation, I have agreed to render the following legal services:

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the Debtor(s) not previously disclosed in this case.

Dated: _____

/s/ _____

Debtor's Attorney