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



	<i>,</i>		
			H3015-2b2 (4/22)
Debtor Name:		SSN (last 4 digits):	Case No.:
Address:			
Jt Debtor Name:		SSN (last 4 digits):	
(if any) Address (if not same as above):			Chapter 13
TRUSTEE'S MOTION TO EXTEND PLAN; NOTICE OF HEARING Hearing to be held remotely using Zoom audio.		Hearing Date: Time:	
Go to Zoomgov.com or phone at (833) 568-8864 (toll-free). Meeting ID: 161 789 3766, Passcode 1132.		Objections due:	
MOTIOI	N		
The Trustee hereby moves for an order under 11 U. plan previously confirmed in this case so as to pay, in fu- claims, and any claims placed in a special class for fu- requiring the Debtor(s) to pay the monthly plan payment a	ll, administrat Ill payment.	ive expenses, The Trustee	secured claims, priority requests an extension
NOTICE			
NOTICE IS HEREBY GIVEN that this motion is scheduled to	pe heard on th	e date and tim	e noted above.
Your rights may be affected. You should read the more carefully and discuss them with your attorney if you have	••		

do not have an attorney, you may wish to consult one.) If you do not want the court to extend the duration of the plan, or if you want the court to consider your views, then you or your attorney must file a statement explaining your position <u>not later than 7 days before the</u> <u>hearing date</u>. Responses must be filed with the court at: **United States Bankruptcy Court, District of Hawaii**, **Suite 250, Honolulu, HI 96813**, and sent to the moving party at the address in the upper left corner of this

If you mail your response to the court for filing, you must mail it early enough so the court will **receive** it on or before the deadline stated above.

If you or your attorney do not take these steps, the court may decide that you do not oppose the motion and may cancel the hearing and grant the motion to extend the duration of the plan without further notice.

Dated:	

document.

Trustee