

**UNITED STATES BANKRUPTCY COURT**  
**District of Minnesota**

In Re:

**Brian Thomas Peterson**  
**XXX-XX-1340**  
**Ginelle Marie Peterson**  
**XXX-XX-7196**

DEBTOR  
 In a joint case,  
 debtor means debtors in this plan.

**MODIFIED**  
**CHAPTER 13 PLAN**

Dated:

Case No. 04-42047

**1. PAYMENTS BY DEBTOR -**

- a. As of the date of this plan, the debtor has paid the trustee **\$0.00**.
- b. After the date of this plan, the debtor will pay the trustee **\$327.00** per **Month** for **36** months, then **\$1834.00** per month for **24** months, beginning within 30 days after the filing of this plan for a total of **\$ 55,788.00**
- c. The debtor will also pay the trustee: **\$0.00**

d. The debtor will pay the trustee a total of **\$55,788.00** [line 1(a) + line 1(b) + line 1(c)].

- 2. **PAYMENTS BY TRUSTEE** - The trustee will make payments only to creditors for which proofs of claim have been filed, make payments monthly as available, and collect the trustee's percentage fee of 10.00% for a total of **\$5,578.80** [line 1(d) x .10] or such lesser percentage as may be fixed by the Attorney General. For purposes of this plan, month one (1) is the month following the month in which the debtor makes the debtor's first payment. Unless ordered otherwise, the trustee will not make any payments until the plan is confirmed. Payments will accumulate and be paid following confirmation.
- 3. **PRIORITY CLAIMS** - The trustee shall pay in full all claims entitled to priority under § 507, including the following. The amounts listed are estimates only. The trustee will pay the amounts actually allowed.

Creditor	Estimated Claim	Monthly Payment	Beg. in Month #	No. of Payments	TOTAL PAYMENTS
<b>Attorney Fees</b>	<b>\$ 1,250.00</b>	<b>\$ 250.00</b>	<b>1</b>	<b>5</b>	<b>\$ 1,250.00</b>
<b>TOTAL</b>					<b>\$ 1,250.00</b>

- 4. **LONG-TERM SECURED CLAIMS NOT IN DEFAULT** - The following creditors have secured claims. Payments are current and the debtor will continue to make all payments which come due after the date the petition was filed directly to the creditors. The creditors will retain their liens.

Name of Creditor	Description Of Property
<b>Harold and Patricia Phipps</b>	<b>Debtors' Residence: Homestead real property locat</b>

- 5. **HOME MORTGAGES IN DEFAULT [§ 1322(b)(5)]** - The trustee will cure defaults (plus interest at the rate of 8.00 percent per annum) on claims secured only by a security interest in real property that is the debtor's principal residence as follows. The debtor will maintain the regular payments which come due after the date the petition was filed. The creditors will retain their liens. The amounts of default are estimates only. The trustee will pay the actual amounts of default.

Creditor	Amount of Default	Monthly Payment	Beg. in Month #	No. of Payments	TOTAL PAYMENTS
<b>None</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>0</b>	<b>0</b>	<b>\$ 0.00</b>
<b>TOTAL</b>					<b>\$ 0.00</b>

- 6. **OTHER LONG-TERM SECURED CLAIMS IN DEFAULT [§ 1322(b)(5)]** - The trustee will cure defaults (plus interest at the rate of 8.00 percent per annum) on other claims as follows and the debtor will maintain the regular payments which come due after the date the petition was filed. The creditors will retain their liens. The amounts of default are estimates only. The trustee will pay the actual amounts of default.

Creditor	Amount of Default	Monthly Payment	Beg. in Month #	No. of Payments	TOTAL PAYMENTS
None	\$ 0.00	\$ 0.00	0	0	\$ 0.00
TOTAL					\$ 0.00

7. **OTHER SECURED CLAIMS [§ 1325(a)(5)]** - The trustee will make payments to the following secured creditors having a value as of confirmation equal to the allowed amount of the creditor's secured claim using a discount rate of 8.00 percent. The creditor's allowed secured claim shall be the creditor's allowed claim or the value of the creditor's interest in the debtor's property, whichever is less. The creditors shall retain their liens. NOTE: NOTWITHSTANDING A CREDITOR'S PROOF OF CLAIM FILED BEFORE OR AFTER CONFIRMATION, THE AMOUNT LISTED IN THIS PARAGRAPH AS A CREDITOR'S SECURED CLAIM BINDS THE CREDITOR PURSUANT TO 11 U.S.C. § 1327 AND CONFIRMATION OF THE PLAN WILL BE CONSIDERED A DETERMINATION OF THE CREDITOR'S ALLOWED SECURED CLAIM UNDER 11 U.S.C. § 506(a).

Creditor	Claim Amount	Secured Claim	Monthly Payment	Beg. in Month #	No. of Payments	TOTAL PAYMENTS
None	\$ 0.00	\$ 0.00	\$ 0.00	0	0	\$ 0.00
TOTAL						\$ 0.00

8. **SEPARATE CLASS OF UNSECURED CREDITORS** - In addition to the class of unsecured creditors specified in ¶ 9, there shall be a separate class of nonpriority unsecured creditors described as follows: (Cosigned debts shall be paid at the contract rate of interest.):

Classification: None  
Creditor:

- a. The debtor estimates that the total claims in this class are \$
- b. The trustee will pay this class \$

9. **TIMELY FILED UNSECURED CREDITORS** - The trustee will pay holders of nonpriority unsecured claims for which proofs of claim were timely filed the balance of all payments received by the trustee and not paid under ¶ 2, 3, 5, 6, 7 and 8 their pro rata share of approximately 48,959.20 [line 1(d) minus lines 2, 3(e), 5(d), 6(d), 7(d) and 8(b)].

- a. The debtor estimates that the total unsecured claims held by creditors listed in ¶ 7 are \$
- b. The debtor estimates that the debtor's total unsecured claims (excluding those in ¶ 7 and ¶ 8) are \$291,464.56
- c. Total estimated unsecured claims are \$291,464.56 [line 9(a) + line 9(b)].

10. **TARDILY-FILED UNSECURED CREDITORS** - All money paid by the debtor to the trustee under ¶ 1, but not distributed by the trustee under ¶ 2, 3, 5, 6, 7, 8 or 9 shall be paid to holders of nonpriority unsecured claims for which proofs of claim were tardily filed.

11. **OTHER PROVISIONS -**

Debtors shall receive a discharge upon completion of the 60 month plan or payment of 100% of timely filed unsecured claims, whichever occurs first. Trustee shall not pay any untimely filed unsecured claims.

12. **SUMMARY OF PAYMENTS -**

Trustee's Fee [Line 2]	<u>5,578.80</u>
Priority Claims [Line 3(e)]	<u>\$1,250.00</u>
Home Mortgage Defaults [Line 5(d)]	<u>\$0.00</u>
Long-Term Debt Defaults [Line 8(d)]	<u>\$0.00</u>
Other Secured Claims [Line 7(d)]	<u>\$0.00</u>
Separate Class [Line 8(b)]	<u>\$0.00</u>
Unsecured Creditors [Line 9(c)]	<u>\$ 48,959.20</u>
TOTAL [must equal Line 1(d)]	<u>\$55,788.00</u>

William P. Kain  
Bar no: 143005  
Schmidt & Lund  
13 7th Avenue South  
St. Cloud, MN 56301

320-252-0330

Signed: \_\_\_\_\_  
Brian Thomas Peterson, DEBTOR

Signed: \_\_\_\_\_  
Ginelle Marie Peterson, JOINT DEBTOR

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MINNESOTA**

\_\_\_\_\_  
In Re:

Bkty. Case No.: 04-42047

Brian Thomas Peterson and  
Ginelle Mare Peterson,  
Debtors.

\_\_\_\_\_

**NOTICE OF CONFIRMATION HEARING**

PLEASE TAKE NOTICE that the Confirmation Hearing on the Chapter 13 Plan is scheduled July 8, 2004 at 10:00 a.m., at the U. S. Bankruptcy Court, U.S. Courthouse, Room West 7, 300 South 4th Street, Minneapolis, Minnesota 55415.

Dated this 7<sup>th</sup> day of June, 2004.

SCHMIDT AND LUND

*William P. Kain*

\_\_\_\_\_  
William P. Kain - #143005  
Attorney for Debtor  
13 South Seventh Avenue  
St. Cloud, MN 56301  
(320) 252-0330



## SERVICE LIST

NORTHLAND FINANCE  
5400 OPPORTUNITY CT STE 150  
MINNETONKA MN 55343

ACCELERATED FINANCIAL  
PO BOX 1042  
ANOKA MN 55303

ALLERGY AND ASTHMA ASSOC  
1511 NORTHWAY DR STE 101  
ST CLOUD MN 56303

ALLINA COLLECTION DEPT  
701 XENIA AVE S  
GOLDEN VALLEY MN 55416

ALLINA COLLECTION DEPT  
700 10TH AVE S  
MINNEAPOLIS MN 55415-1760

AMERICAN RECOVERY  
1699 WALL ST STE 300  
MT PROSPECT IL 60056-5788

AMERICAN RECOVERY  
1699 WALL ST STE 300  
MT PROSPECT IL 60056

ANESTHESIA OF ST CLOUD  
PO BOX 725  
ST CLOUD MN 56302

BENEFICIAL HOUSEHOLD  
PO BOX 8873  
VIRGINIA BEACH VA 23450-8873

BUFFALO CLINIC  
1700 HWY 25 N  
BUFFALO MN 55313

CENTRA CARE CLINIC  
1200 6TH AVE N  
ST CLOUD MN 56303

CENTRA CARE CLINIC  
1200 6TH AVE N  
ST CLOUD MN 56303

CENTRAL MN EMERGENCY  
1406 6TH AVE N  
ST CLOUD MN 56303-1901

CENTRAL MN PHYSICIANS  
1406 6TH AVE N  
ST CLOUD MN 56303-1901

CENTRAL MN SURGEONS  
2000 ABBOT N WESTERN COURT  
STE 300  
SARTELL MN 56377

CENTRAL ORAL SURGEONS  
3950 N 8TH ST STE 100  
ST CLOUD MN 56303

CHADWICKS  
PO BOX 4400  
TAUNTON MA 02780-7359

COLLECTION RESOURCES  
PO BOX 2270  
ST CLOUD MN 56302

CONSOLIDATED BUSINESS  
701 XENIA AVE S  
GOLDEN VALLEY MN 55416-1029

FORD CREDIT  
PO BOX 64400  
COLORADO SPRINGS CO 80962-4400

HAROLD AND PATRICIA PHIPPS  
PO BOX 366  
EDEN VALLEY MN 55329

HARRY'S DISCOUNT AUTO  
1808 CEDAR PLACE  
BUFFALO MN 55313

HPA  
1300 GODWARD ST NE #4100  
MINNEAPOLIS MN 55413

MIDWEST COLLECTION  
PO BOX 1181  
ST CLOUD MN 56302

MIDWEST COLLECTION  
WEISBERG LAW  
PO BOX 26759  
MINNEAPOLIS MN 55426

MONTI BIG LAKE HOSPITAL  
1013 HART BLVD  
MONTICELLO MN 55362

NAT CREDIT AUDIT  
8600 N INDUSTRIAL RD  
PEORIA IL 61615

NAT CREDIT AUDIT  
8600 N INDUSTRIAL RD  
PEORIA IL 61615

NEWPORT NEWS  
5000 CITY LINE RD  
HAMPTON VA 23661

PAC CAR FINANCIAL  
RIHM KENWORTH INC  
2108 UNIVERSITY AVE  
ST PAUL MN 55114

PROVIDENT BANK  
C/O WILFORD & GESKE  
7560 CURRELL BLVD STE 300  
WOODBURY MN 55125

REGIONAL DIAGNOSTIC  
PO BOX 7366  
ST CLOUD MN 56302

RELIANCE RECOVERIES  
PO BOX 29227  
MINNEAPOLIS MN 55429

ROBERT LINDHOLM  
BAYER TRUCKS  
3904 SHERIDAN AVE S  
MINNEAPOLIS MN 55410

SHERMAN INS AGENCY  
PO BOX 177  
S ST PAUL MN 55075-0177

ST CLOUD HOSPITAL  
1406 6TH AVE N  
ST CLOUD MN 56303

SUNRISE CREDIT  
260 AIRPORT PLAZA  
FARMINGDALE NY 11735-3976

WALSER OUTLET CENTER  
C/O MARK PETERSON  
STE 150  
5200 WILSON RD  
EDINA MN 55424

U S TRUSTEE  
1015 U S COURTHOUSE  
300 S FOURTH ST  
MINNEAPOLIS MN 55415

MICHAEL J FARRELL  
PO BOX 519  
BARNESVILLE MN 56514

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MINNESOTA

In re: **Brian Thomas Peterson**  
**Ginelle Marie Peterson**

**SIGNATURE DECLARATION**

Debtor(s).

Case No. \_\_\_\_\_

- PETITION, SCHEDULES & STATEMENTS  
 CHAPTER 13 PLAN  
 SCHEDULES AND STATEMENTS ACCOMPANYING VERIFIED CONVERSION  
 AMENDMENT TO PETITION, SCHEDULES & STATEMENTS  
 MODIFIED CHAPTER 13 PLAN  
 OTHER (Please describe: \_\_\_\_\_)

I [We], the undersigned debtor(s) or authorized representative of the debtor, *make the following declarations under penalty of perjury:*

- The information I have given my attorney and provided in the electronically filed petition, statements, schedules, amendments, and/or chapter 13 plan, as indicated above, is true and correct;
- The information provided in the "Debtor Information Pages" submitted as a part of the electronic commencement of the above-referenced case is true and correct;
- **[individual debtors only]** If no Social Security Number is included in the "Debtor Information Pages" submitted as a part of the electronic commencement of the above-referenced case, it is because I do not have a Social Security Number;
- I consent to my attorney electronically filing with the United States Bankruptcy Court my petition, statements and schedules, amendments, and/or chapter 13 plan, as indicated above, together with a scanned image of this Signature Declaration and the completed "Debtor Information Pages," if applicable; and
- **[corporate and partnership debtors only]** I have been authorized to file this petition on behalf of the debtor.

Date: 06/02/04

Brian Peterson  
Signature of Debtor or Authorized Representative

BRIAN PETERSON  
Printed Name of Debtor or Authorized Representative

Ginelle Peterson  
Signature of Joint Debtor

Ginelle Peterson  
Printed Name of Joint Debtor