UNITED STATES BANKRUPTCY COURT

DISTRICT OF SOUTH CAROLINA

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| IN RE:  (Set forth here all names including married, maiden, and trade names used by debtor within the last 8 years.)                                                DEBTOR(S)  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_               \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Last four digits of Social-Security or Individual Tax-Payer-Identification (ITIN) No(s)., (if any): \_\_\_\_\_\_\_ | CASE NO:  CHAPTER 13 |

NOTICE OF CONFIRMATION HEARING

           The debtor(s) in the above captioned case filed a chapter 13 plan on \_\_\_\_\_\_\_\_\_\_\_\_\_\_. The plan is attached, or will be separately mailed to you by the debtor(s).

**Your rights may be affected by the plan**. You should read the plan carefully and discuss it with your attorney, if you have one in this bankruptcy case. (If you do not have an attorney, you may wish to consult one.)

          Any objection to confirmation of the chapter 13 plan must be filed with the Court at 1100 Laurel Street, Columbia, SC 29201-2423 and served on the chapter 13 trustee, the debtor(s), and any attorney for the debtor(s) at least seven days prior to the confirmation hearing. Objections to confirmation may be overruled if the objecting party fails to appear and prosecute the objection. If no objection is timely filed, the plan may be confirmed on recommendation of the trustee.

          The confirmation hearing will be held on \_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_ a.m., Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

If you or your attorney do not take these steps, the court may decide that you do not oppose the relief sought in the plan and may enter an order confirming the plan.

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| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Signature of Attorney/ Pro Se Debtor |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Typed Printed Name |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Address/Telephone/Facsimile/E-mail |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | District Court I.D. Number |