Form No. 13-2 Effective

Exhibit A Plan Summary for Proposed Plan

Disposable Income and Plan Payments

(A)	(B)	(C)	(D)	(E)	(F)	(G)	1	(H	D.	(I)
	` '	Projected			Ending				Total	
Projected Schedule	Projected Schedule "J"	3	Payment	Beginning	C	Payments for the Benefit of				
		Disposable	Amount	Month #1	Month #			Deposits Established Under Plan		Monthly
"I" Income	Expenses	Income	to			Creditors and for				Trustee
(From most	(From most	(Column A	Trustee			Reserves ²		(Column D minus		Payments
recently	recently	minus						Column G)		(Column D
filed	filed	Column B)								multiplied
Schedule I)	Schedule J)									by number
										of months
										paid)
						Per Month	Total	Per Month	Total	
				1						
					Grand					
					Total					
			Less Posted Chapter 13 Trustee							
				Fee ⁴						
			Net Av	ailable to Cre	editors					

Projected Trustee Disbursements to Secured Creditors

Name of Holder	Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month #	Total
Holder's Name:							
Treated under Plan Section:							
Check One: Surrendered Transferred Retained (paid direct) Retained (paid through Trustee) ⁵							
Cure Claim							
Post-petition Claim							

¹ This is the month in which the first payment is due for this amount. The Debtor(s) must commence payments not later than 30 days after the petition date.

² Reserves are established under Paragraph 21 of the Plan.

³ Savings funds are funds established under Paragraph 20 of the Plan.

⁴ The Posted Chapter 13 Trustee Fee is based on the percentage listed on the Court's website.

⁵ Amounts for Cure Claims, Monthly Payments, Total Debt Claims and Monthly Refinance Payments should be listed only if the box for "Retained (paid through Trustee)" is checked.

Name of Holder	Description of Collateral	Claim	Plan Int. Rate	Monthly Payment Amount	Starting Month #	Ending Month #	Total
Rule 3002.1(c)							
Claim Monthly Payment							
Total Debt Claim							
Monthly Refinance							
Payment (¶ 8D)							
Holder's Name:							
Treated under Plan Section:							
	endered Transf	ferred Reta	ined (pa	id direct)	Retained (1	oaid throug	gh Trustee)
Cure Claim				<u> </u>			,
Post-petition Claim							
Rule 3002.1(c) Claim							
Monthly Payment							
Total Debt Claim							
Monthly Refinance							
Payment (¶ 8D)							
		Total	l of Pay	ments to S	ecured Cr	editors	
	D 1 175	, D. I		. D : :/ C			
N. CILLI		rustee Disburse				E-d	Total
Name of Holder	Nature of	Claim	Int.	Monthly	Beg.	End	1 otai
Name of Holder	Priority (Taxes, Attorneys Fees, DSO, etc.)	Claim	Rate	Monthly Payment Amount	Beg. Month #	Month #	10tat
Holder's Name:	Priority (Taxes, Attorneys Fees, DSO,	Claim		Payment	Month	Month	Total
	Priority (Taxes, Attorneys Fees, DSO,	Claim		Payment	Month	Month	10tai
Holder's Name: Treated under Plan	Priority (Taxes, Attorneys Fees, DSO,	Claim		Payment	Month	Month	Total
Holder's Name: Treated under Plan Section: Holder's Name: Treated under Plan	Priority (Taxes, Attorneys Fees, DSO,	Claim		Payment	Month	Month	Total
Holder's Name: Treated under Plan Section: Holder's Name:	Priority (Taxes, Attorneys Fees, DSO,		Rate	Payment	Month #	Month #	Total
Holder's Name: Treated under Plan Section: Holder's Name: Treated under Plan	Priority (Taxes, Attorneys Fees, DSO,		Rate	Payment Amount	Month #	Month #	Total
Holder's Name: Treated under Plan Section: Holder's Name: Treated under Plan	Priority (Taxes, Attorneys Fees, DSO, etc.)	Tota Projected Trust	Rate I of Pay	Payment Amount	Month #	Month #	
Holder's Name: Treated under Plan Section: Holder's Name: Treated under Plan	Priority (Taxes, Attorneys Fees, DSO, etc.)	Tota Projected Trust Reserve Fund Type	Rate I of Pay	Payment Amount	Month #	Month #	Total
Holder's Name: Treated under Plan Section: Holder's Name: Treated under Plan	Priority (Taxes, Attorneys Fees, DSO, etc.)	Tota Projected Trust	Rate I of Pay	Payment Amount	Month #	Month #	
Holder's Name: Treated under Plan Section: Holder's Name: Treated under Plan	Priority (Taxes, Attorneys Fees, DSO, etc.)	Tota Projected Trust Reserve Fund Type	Rate I of Pay	Payment Amount	Month #	Month #	
Holder's Name: Treated under Plan Section: Holder's Name: Treated under Plan	Priority (Taxes, Attorneys Fees, DSO, etc.)	Tota Projected Trust Reserve Fund Type	Rate I of Pay	Payment Amount	Month #	Month #	

Total of Reserve Funds

SUMMARY

1	Total Payments to Trustee	
2	Less Posted Chapter 13 Trustee Fee	
3	Less Total Payments by Trustee to Secured Creditors	
4	Less Total Payments by Trustee to Priority Creditors, Including Debtor(s)'	
	Attorney ($\S 507(a)(1) - (a)(10)$)	
5	Less Total Reserve Funds	
6	Net Available for General Unsecured Creditors (Line 3 minus lines 4-8)	

Best Interest of Creditors Test

7	Total Non-Exempt Property	
8	Compensation to Debtor's counsel paid under 11 U.S.C. §330(a)(1)	
9	Total Distributions to Priority and General Unsecured Creditors (Line 4 plus line	
	6 minus line 8 plus any direct payments by Debtor(s) under the Plan in satisfaction	
	of prepetition priority claims)	
10	Excess satisfaction of best Interest of creditors test (line 9 minus line 7)	
11	Estimated Total General Unsecured Claims	
12	Forecast % Dividend on General Unsecured Claims (line 6 divided by line 11)	