**IN THE UNITED STATES BANKRUPTCY COURT**

**FOR THE SOUTHERN DISTRICT OF TEXAS**

**\_\_\_\_\_\_\_\_\_\_\_\_\_ DIVISION**

**In re: §**

 **§ Case No. \_\_\_\_\_\_\_\_\_\_\_\_**

**[Debtor(s)’ Names], § (Chapter 13)**

 **§**

**Debtor(s). §**

**NOTICE AND APPLICATION FOR**

**WITHDRAWAL FROM SAVINGS FUND**

Name of Debtor(s) filing this Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

|  |  |
| --- | --- |
| Total amount on deposit in Savings Fund as of the date of the application. |  $0.00 |
| Amount of requested withdrawal. |  $0.00 |
| Date on which withdrawal is required. |  |
| Total of all other savings held by Debtors. |  $0.00 |
| If the funds are withdrawn, for what will the funds be used? |  |
| Describe, in detail, why it is necessary to spend the funds. Attach additional pages if required. |  |
| Describe any other information that should be considered by the Court in determining whether to allow the withdrawal. Attach relevant invoices and other documents. |  |
| Lists dates and amounts of any previous withdrawals. |  |

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[SIGNATURE BLOCK]

**CERTIFICATE OF SERVICE**

 Service of this application was made only by electronic means through the Court’s CM/ECF system. Copies of the application will not be mailed.

 Date: \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_