

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF IOWA**

In re: _____

Case No. _____

Date: _____

Time: _____

Courtroom: _____

PLAN BALLOT SUMMARY

1. Proponent of Plan (*Specify name*): _____
2. Are any competing plans filed with the Court? Yes No
3. Is a cramdown requested? Yes No
4. Unimpaired Classes (*Specify Class Numbers*): _____
5. Impaired Classes (*Specify Class Numbers*): _____
6. Has any impaired class approved the Plan? Yes No
(If YES, specify which class or classes): _____
7. The following is the voting summary by creditor class:

	ACCEPTING				REJECTING			
	Number	%	Amount	%	Number	%	Amount	%
Class 1								
Class 2								
Class 3								
Class 4								
Class 5								
Class 6								

Other Classes: See attached Continuation Page

Dated: _____

Signature: _____

Attorney for Plan Proponent

Typed Signature of Attorney for Plan Proponent

This form is optional.