

FILER'S NAME, ADDRESS, PHONE, FAX, EMAIL:



District Court of Guam
520 W Soledad Ave Fl 4
Hagåtña, Guam 96910

Debtor:

Case No.:

Joint Debtor:
(if any)

Chapter: 13

**SUPPLEMENTAL DISCLOSURE OF COMPENSATION
BY ATTORNEY FOR CHAPTER 13 DEBTOR**

Use this form for compensation paid directly by Debtor or another source. If being paid by the Trustee through the plan, complete and file a Request for Payment of Administrative Expense: Compensation for Debtor's Attorney in Chapter 13 Case [GUB 3070-2a2].

Pursuant to 11 U.S.C. § 329(a), Fed. R. Bankr. P. 2016(b), and BKLR 2016-1(c), I make this supplemental disclosure of compensation paid to me as the attorney for the above-named Debtor(s). The initial amount of compensation was allowed in accordance with the Chapter 13 Attorney Fee Guidelines ("Guidelines") of this court. As authorized by the Guidelines, I have received or have agreed to accept directly from the Debtor(s) or another party additional compensation for certain post-confirmation services. The payment does not exceed the amounts specified in the Guidelines.

Amount of compensation being disclosed: \$

The source of the compensation paid or to be paid to me is: ☐ Debtor(s)☐ Other: _____

In return for the above-disclosed compensation, I have agreed to render the following legal services:

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the Debtor(s) not previously disclosed in this case.

Dated: _____

/s/ _____

Debtor's Attorney