

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF NEBRASKA**

IN RE: _____ ) _____ ) _____ ) , _____ ) _____ ) Debtor(s). _____ )	<b>CHAPTER 12 PROCEEDING CASE NO. BK _____</b>  <b>OPERATING REPORT</b> ____ 1ST ____ 2ND ____ 3RD ____ 4TH <b>QUARTER OF 20 ____</b>
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QUARTERLY REPORT SUMMARY RECONCILIATION TO BANK ACCOUNT		
Beginning Bank Balance (same as ending bank balance from previous quarterly report)		\$ _____
Plus Receipts		\$ _____
Less Disbursements		\$ _____
Ending Bank Balance (carry forward to beginning balance on next quarterly report)		\$ _____

RECEIPTS			
	SOURCE	DATE OF RECEIPT	AMOUNT
<b>Employment Income:</b>			
<b>Crop Sales:</b>			
<b>Livestock Sales:</b>			

<b>RECEIPTS (continued)</b>			
	<b>SOURCE</b>	<b>DATE OF RECEIPT</b>	<b>AMOUNT</b>
<b>Rents:</b>			
<b>Loan Proceeds:</b>			
<b>Government Program Receipts:</b>			
<b>Insurance Proceeds:</b>			
<b>Custom Hire:</b>			
<b>Other:</b>			
<b>TOTAL RECEIPTS</b>			<b>\$</b>

<b>DISBURSEMENTS</b>			
	<b>PAID TO</b>	<b>DATE OF PAYMENT</b>	<b>AMOUNT</b>
<b>Farm Expenses:</b>			
Chemicals			
Custom Hire (machine work)			
Feed			
Fertilizers			
Freight & Trucking			
Gasoline, Fuel, Oil			
Hired Labor			
Insurance (other than health)			
Irrigation Expense			
Rent: Land, Animals			
Rent: Vehicles, Machinery, Equipment			
Repairs & Maintenance			
Seeds			
Storage & Warehousing			
Supplies			
Taxes			
Utilities			
Veterinary			
Other (list):			

**DISBURSEMENTS (continued)**

	<b>PAID TO</b>	<b>DATE OF PAYMENT</b>	<b>AMOUNT</b>
<b>Personal Living Expenses (list):</b>			
<b>Payments to Trustee (list):</b>			
<b>Direct Payments(not through Trustee) (list):</b>			
<b>TOTAL DISBURSEMENTS</b>			<b>\$</b>

The Debtor(s) named hereunder verify that the above information is true, correct, and complete.

\_\_\_\_\_  
Debtor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Debtor

\_\_\_\_\_  
Date