



BANKRUPTCY CENTER OF LOUISIANA

938 Lafayette Street

Suite 507

NEW ORLEANS, LOUISIANA 70113

TELEPHONE (504) 522-1717

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Mailing Address

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New Orleans, Louisiana 70158

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Motion for Relief from Stay

NAME: _____

CASE NUMBER: _____

HEARING DATE: _____

Please state the reason that you fell behind on your mortgage obligation:

Please complete the attached Actual Check Payments Made by Debtor Form.

*Fax proof of these payments to Russ Law Firm, LLC at (504) 522-1715 and confirm it has been received. Payments by check must include a copy of your bank statement which shows the checks have been processed. All proofs of payments must have the month in which the payment was submitted labeled clearly.

I/we understand that in order for Russ Law Firm, LLC to negotiate a consent order on this motion I/we must provide the above requested information to the office via fax number (504) 522-1715 NO LATER THAN one week after the filing of this motion.

I/we understand that our attorney may request that additional attorney fees **up to \$300.00** be paid for filing this motion and attending court on my/our behalf as set forth in the attorney client agreement and the 2016B statement of my/our Voluntary Petition and Schedules filed with the court as this is NOT a regular service anticipated by the original filing of my case.

Client

Client

Date: _____

ACTUAL CHECK PAYMENTS MADE BY DEBTOR

Name of Debtor: _____ Case No.: _____ Name of Mortgage Comp.: _____

Form of Payment (if check, the check #)	Date of Payment	Amount of Payment	Date Mortgage Co. Received Payment	Month and Year the Mortgage Co. Applied the Payment to
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				