

Motion for Relief from Stay

NAME:	
CASE NUMBER:	
HEARING DATE:	
Please state the reason that you fell behind on your	r mortgage obligation:
	. ;
Please complete the attached Actual Check Paymen	nts Made by Debtor Form.
*Fax PROOF of these payments to The Martin Law of it has been received. Payments by check must include shows the checks have been processed. All proofs of the payment was submitted labeled clearly.	de a copy of your bank statement which
I/we understand that in order for The Martin Law Gr this motion I/we must provide the above requested (404) 248-8984 NO LATER THAN one week after the	information to the office via fax number
I/we understand that our attorney may request that paid for negotiating this motion and attending court attorney client agreement and the 2016B statement filed with the court as this is NOT a regular service ar	on my/our behalf as set forth in the of our Voluntary Petition and Schedules
Client	Client
Date:	

ACTUAL CHECK PAYMENTS MADE BY DEBTOR

ame of Debtor:	Case No.:	Name of Mortgage Comp.:	
Form of Payment		1	

		100								10.	11.	12.	13.	14.
Form of Payment (if check, the check #)	1	2.	3.	4.	5.	6.	7.	8.	9.	0.	1.	2.	3.	4.
Date of Payment														
Amount of Payment														
Date Mortgage Co. Received Payment														
Month and Year the Mortgage Co. Applied the Payment to														