



## Appendix E: Activity Report for Approved Credit Counseling Agencies

Please submit this report within 15 calendar days following the end of each **six-month period**.

Questions? Contact United States Trustees at (202) 514-4100

<b>Reporting Period:</b> (Check one)	<input type="checkbox"/> July-December	<input type="checkbox"/> January-June	<b>Year:</b> _____
<b>Name of Agency:</b> _____	<b>Agency No:</b> _____		
<b>Contact Person:</b> _____	<b>E-Mail:</b> _____		
Someone who could answer USTP questions regarding report			

**Instructions:** Please provide actual (not estimated) data for all clients seen by your agency this reporting period. No cell should be left blank. If none, enter "0" in the cell.

**New Clients this Reporting Period**

Q1 Number of new <b>pre-bankruptcy</b> clients counseled this reporting period	[ ]
Q2 Number of <b>other</b> new clients counseled this reporting period	[ ]

**Debt Management Plans (DMPs)**

Q3 DMPs active at the start of this reporting period	[ ]
Q4 DMPs active at the end of this reporting period	[ ]
Q5 Of all new <b>pre-bankruptcy</b> clients seen this reporting period, how many enrolled in DMPs	[ ]
Q6 Of all <b>other</b> new clients seen this reporting period, how many enrolled in DMPs	[ ]
Q7 DMPs closed this reporting period <b>with</b> completed debt management plans	N [ ]
Q8 DMPs closed this reporting period <b>without</b> completed debt management plans	[ ]
Q9 Percentage of new <b>pre-bankruptcy</b> new credit counseling clients enrolled in DMPs*	N [ ] % <small>(Q5 ÷ Q1) x 100</small>
Q10 Percentage of <b>other</b> new credit counseling clients enrolled in DMPs*	N [ ] % <small>(Q6 ÷ Q2) x 100</small>

\* If greater than 100%, please check your data

**Instructions:** Please provide actual counts and total fees for all bankruptcy certificates issued by your agency this reporting period. No cell should be left blank. If none, please enter "0" in the cell.

**Credit Counseling Certificates Issued this Reporting Period**

	Counseling Method (Counts)									
	a In-Person	b Telephone*	c Internet							
Q11 Certificates issued at no cost				<b>Q14</b> Total Fees or Contributions <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; height: 20px;"></td> <td style="font-size: small; text-align: right;">a</td> </tr> <tr> <td style="border: 1px solid black; height: 20px;"></td> <td style="font-size: small; text-align: right;">b</td> </tr> <tr> <td style="border: 1px solid black; height: 20px;"></td> <td></td> </tr> </table>		a		b		
	a									
	b									
Q12 Certificates issued at reduced cost										
Q13 Certificates issued at regular cost										
<b>Total</b>				(Q14a+Q14b)						

(Q11a+Q12a+Q13a) (Q11b+Q12b+Q13b) (Q11c+Q12c+Q13c)

\* Includes both Telephone only and Telephone combined with Internet counseling.