

# Client Questionnaire for Non-Business Debtor

## General Information

### **Debtor:**

Name:	_____
Street Address:	_____ _____
County:	_____
Mailing Address:	_____ _____
Social Security Number:	_____
Have you used any other name in the past 6 years?	Yes    No
If yes, please provide:	_____
Home Phone:	_____
Work Phone:	_____
Other:	_____

### **Spouse:**

Name:	_____
Street Address:	_____ _____
County:	_____
Mailing Address:	_____ _____
Social Security Number:	_____
Have you used any other name in the past 6 years?	Yes    No
If yes, please provide:	_____
Home Phone:	_____
Work Phone:	_____
Other:	_____

**Prior Bankruptcies:**

Location Filed:	_____
Case No.:	_____
Date Filed:	_____
Location Filed:	_____
Case No.:	_____
Date Filed:	_____

**Dependents:**

Name:	_____
Age:	_____
Relationship:	_____
Name:	_____
Age:	_____
Relationship:	_____
Name:	_____
Age:	_____
Relationship:	_____

**Employment:**

<u>Husband:</u> Occupation: _____ Employer Name: _____ Address: _____ _____ Length of Employment: _____	<u>Spouse:</u> Occupation: _____ Employer Name: _____ Address: _____ _____ Length of Employment: _____
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**Assets:**

**Real Property Assets:**

What is real property?

Real property consists of an area of land and whatever is erected or growing upon or affixed to the land. What does this mean to you? It means your home, property you rent to others, or acreage.

What is a homestead?

A homestead is your land (with or without a dwelling) and the adjoining land where the head of a family dwells. It is your fixed residence with the land and buildings surrounding the main house. In other words, if you own a house and/or land, and it is your primary place of residence, this land/house can be claimed as your homestead. A rural homestead may consist of 100 acres for a single person and 200 acres for a family. A temporary renting of a homestead to someone else is permissible as long as you intend to move back into the house.

In the following sections please indicate to whom the assets belong (husband, wife, joint).

**Homestead:**

Legal Description of Home: _____ _____ _____
Address of Home: _____ _____
Market Value of Home:     \$ _____                      Whose Asset: _____

**Additional Real Property:**

Legal Description of Property: _____ _____ _____
Address of Property: _____ _____
Market Value of Property:     \$ _____                      Whose Asset: _____

Legal Description of Property: _____ _____ _____
Address of Property: _____ _____
Market Value of Property:     \$ _____                      Whose Asset: _____

**Personal Property Assets:**

Please list all your personal property assets and their values. Provide an answer to every question. If a question does not apply to you, indicate with NA.

1. **Cash on Hand:** \$\_\_\_\_\_

Whose Asset: \_\_\_\_\_

2. **Checking Accounts, Savings Accounts, CD's or other accounts held at financial institutions:**

1. Name and Address of Institution: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Account and Account #: \_\_\_\_\_

Current Balance: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

2. Name and Address of Institution: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Account and Account #: \_\_\_\_\_

Current Balance: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

3. Name and Address of Institution: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Account and Account #: \_\_\_\_\_

Current Balance: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

**If your bank account is in overdraft, please list the bank as an unsecured creditor in the creditor section of this questionnaire.**

3. **Security Deposits:**

Do you have deposits with a landlord? If yes, list amount of deposit \$\_\_\_\_\_

Name and Address of Landlord: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Whose Asset: \_\_\_\_\_

**If you have an unexpired lease with this landlord, please list in the executory contracts/unexpired leases section of this questionnaire.**

Do you have deposits with a utility company? If yes, list amount of deposit \$\_\_\_\_\_

Name and Address of Utility Company? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Whose Asset: \_\_\_\_\_

4. **Household goods and Furnishings:**

Please provide brief descriptions and values of your household goods and furnishings. You may use garage sale value if it is in fact the amount for which you could sell the item.

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

**If any of your household goods and furnishings have a lien on them, please list them separately and include the creditor as a secured creditor in the creditor section of this questionnaire.**

5. **Books, Pictures, Antiques, Collectibles:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

6. **Wearing Apparel:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

7. **Furs and Jewelry:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

8. **Firearms, Sports and Hobby Equipment:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

9. **Interest in Insurance Policies:**

Do you have cash value in insurance policies?      Yes    No

Name and Address of Company: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Policy Number: \_\_\_\_\_      Cash Value: \$\_\_\_\_\_

Whose Asset: \_\_\_\_\_

10. **Annuities:**

Do you have any annuities? Yes No

Issuer Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Account Number: \_\_\_\_\_ Current Value: \$\_\_\_\_\_

Whose Asset: \_\_\_\_\_

11. **IRA's and Pension or Retirement Plans:**

Name and Address where account is held: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Account Number: \_\_\_\_\_ Market Value: \$\_\_\_\_\_

Whose Asset: \_\_\_\_\_

12. **Stocks and Interest in Businesses:**

Do you own any stock/interest in an incorporated or unincorporated business? Yes No

Name and Address of Company: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of Shares or Interest Percent: \_\_\_\_\_

Value per Share \$\_\_\_\_\_ Value of Shares or Interest: \$\_\_\_\_\_

Whose Asset: \_\_\_\_\_

13. **Interest in Partnerships and Joint Ventures:**

Do you own any interest in partnerships or joint ventures? Yes No

Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Percent of Interest: \_\_\_\_\_ Value of Interest: \$\_\_\_\_\_

Whose Asset: \_\_\_\_\_

14. **Government and Corporate Bonds (including Savings Bonds):**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

15. **Accounts Receivable or Other Money Owed to You:**

Name and Address of who owes you money: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How much do they owe you? \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Do you have any accounts receivable or are any liquidated debts (a debt in a specific amount) owed to you by anyone? Yes No

Name and Address of Debtor? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Amount Owed: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

16. **Alimony, Child Support, etc.:**

Name and Address of Debtor? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Amount Owed: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

17. **Other Debts Owed to Debtor:**

Are you expecting a tax refund? Yes No

For What Tax Year? \_\_\_\_\_ Amount of Refund: \$\_\_\_\_\_

Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

18. **Equitable or Future Interests:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

19. **Interests in Decedent's Estate of Death Benefit Plan:**

Do you expect to inherit any money or property in the next 180 days? Yes No

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

20. **Other Contingent and Unliquidated Claims:**

List all contingent or unliquidated claims of every nature owed to you, including counterclaims (for example, damages for a car accident that have not yet been settled):

Debtor's Name and Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nature of Claim: \_\_\_\_\_

Estimated Claim: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

21. **Patents and Copyrights:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

**22. Licenses, Franchises and Other General Intangibles:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

**23. Automobiles, Trucks, Motorcycles, Trailers and Other Vehicles:**

**Auto # 1:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Mileage: \_\_\_\_\_

Circle the options for your vehicle:

A/C	Sun Roof	Power Sun Roof	C/D Player	Power Windows
Power Door Locks	Power Seats	Power Steering	Cruise Control	Tilt Steering
Automatic Trans.	T-Tops	Convertible	Moon Roof	Leather Seats
Diesel Engine	Four Wheel Drive	Anti-Theft Device	4/6/8 Cylinder - circle	Extended Cab
Bed Length _____	Alloy Wheels	# of Doors _____		

**Auto #2:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Mileage: \_\_\_\_\_

Circle the options for your vehicle:

A/C	Sun Roof	Power Sun Roof	C/D Player	Power Windows
Power Door Locks	Power Seats	Power Steering	Cruise Control	Tilt Steering
Automatic Trans.	T-Tops	Convertible	Moon Roof	Leather Seats
Diesel Engine	Four Wheel Drive	Anti-Theft Device	4/6/8 Cylinder - circle	Extended Cab
Bed Length _____	Alloy Wheels	# of Doors _____		

**Auto #3:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Mileage: \_\_\_\_\_

Circle the options for your vehicle:

A/C	Sun Roof	Power Sun Roof	C/D Player	Power Windows
Power Door Locks	Power Seats	Power Steering	Cruise Control	Tilt Steering
Automatic Trans.	T-Tops	Convertible	Moon Roof	Leather Seats
Diesel Engine	Four Wheel Drive	Anti-Theft Device	4/6/8 Cylinder - circle	Extended Cab
Bed Length _____	Alloy Wheels	# of Doors _____		

**24. Boats, Motors and Other Accessories:**

Description: \_\_\_\_\_

Value: \$ \_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$ \_\_\_\_\_ Whose Asset: \_\_\_\_\_

**25. Aircraft and Accessories:**

Description: \_\_\_\_\_

Value: \$ \_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$ \_\_\_\_\_ Whose Asset: \_\_\_\_\_

**26. Office Equipment, Furnishings, and Supplies:**

Description: \_\_\_\_\_

Value: \$ \_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$ \_\_\_\_\_ Whose Asset: \_\_\_\_\_

27. **Machinery, Equipment, and Supplies used in Business:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

28. **Inventory:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

29. **Livestock, Poultry and Other Animals:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

30. **Crops:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

31. **Farm Equipment and Implements:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

32. **Farm Supplies, Chemicals and Feed:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

33. **Other Personal Property:**

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

Description: \_\_\_\_\_

Value: \$\_\_\_\_\_ Whose Asset: \_\_\_\_\_

**\*\*If any property is not in your personal possession or control, please indicate.\*\***

**YOU SHOULD HAVE LISTED ALL THE PROPERTY YOU OWN. IF YOU OWN PROPERTY THAT IS NOT LISTED ON THIS SCHEDULE, PLEASE PROVIDE A DESCRIPTION AND VALUE IN THE SPACE BELOW:**

## Creditors:

You are required by law to list all debts you owe on your bankruptcy, even if you intend to keep making payments to the creditor. Any creditor not listed will not be discharged upon completion of your bankruptcy and you will still be liable for that debt. You should include any creditor who you owe money regardless of whether or not you agree with the debt.

Please complete the information requested for each creditor completely and accurately. It is imperative that you provide a complete name and address for each creditor. Please review billing statements to ensure that notices are sent to the correct address. Please list the address for "billing inquires" or "send notice to."

If a debt has been turned over to a collection agency or attorney, please list the original creditor and the collection agency. Provide the name, address, and account numbers for both.

**Have you, in the past 90 days, made any purchases on credit or cash withdrawals?**

[ ] Yes [ ] No

**If yes, please answer the following.**

Name of Creditor	Description of Purchase/Withdrawal	Date

In the following sections, please indicate to whom the debt is assigned (husband, wife, joint)

### **Secured Creditors**

What are secured debts?

A secured debt is a debt which has collateral of security. This means that if you don't pay the debt, the creditor can repossess the item they are holding as security for the debt. Houses, land, cars, large appliances and furniture are all examples of secured debts. Purchases of appliances, furniture, televisions, VCR's, DVD players, stereos, computers, jewelry, etc. purchased on department store credit cards could be secured debts.

**Home Mortgage:**

Name: _____	Date Incurred: _____
Address: _____ _____	Interest Rate: _____
	Account #: _____
Monthly payment amount: \$ _____	Whose Debt: _____
Amount Owed _____	
Are you behind on your mortgage payments? If yes, how much? \$ _____	
Is there a co-debtor? If yes, provide name and address. _____ _____ _____	
Have you made arrangements with your mortgage holder concerning delinquent payments? Yes No If yes, please explain	

**Second Lien:**

Name: _____	Date Incurred: _____
Address: _____ _____	Interest Rate: _____
	Account #: _____
Monthly payment amount: \$ _____	Whose Debt: _____
Amount Owed _____	
Are you behind on your mortgage payments? If yes, how much? \$ _____	
Is there a co-debtor? If yes, provide name and address. _____ _____ _____	
Have you made arrangements with your mortgage holder concerning delinquent payments? Yes No If yes, please explain.	

**Auto # 1:**

Name: _____	Date Incurred: _____
Address: _____ _____	Interest Rate: _____
_____	Account #: _____
Monthly payment amount: \$ _____	Whose Debt: _____
Amount Owed _____	Length of Loan: _____
Are you behind on your auto payments? If yes, how much? \$ _____	
Is there a co-debtor? If yes, provide name and address. _____ _____ _____	
Have you made arrangements with your auto lender concerning delinquent payments? Yes No If yes, please explain	

**Auto # 2:**

Name: _____	Date Incurred: _____
Address: _____ _____	Interest Rate: _____
_____	Account #: _____
Monthly payment amount: \$ _____	Whose Debt: _____
Amount Owed _____	Length of Loan: _____
Are you behind on your auto payments? If yes, how much? \$ _____	
Is there a co-debtor? If yes, provide name and address. _____ _____ _____	
Have you made arrangements with your auto lender concerning delinquent payments? Yes No If yes, please explain	

**Auto # 3:**

Name: _____	Date Incurred: _____
Address: _____ _____	Interest Rate: _____
	Account #: _____
Monthly payment amount: \$ _____	Whose Debt: _____
Amount Owed _____	Length of Loan: _____
Are you behind on your auto payments? If yes, how much? \$ _____	
Is there a co-debtor? If yes, provide name and address. _____ _____ _____	
Have you made arrangements with your auto lender concerning delinquent payments? Yes No If yes, please explain	

**Other Secured Debt:**

Name: _____	Date Incurred: _____
Address: _____ _____	Interest Rate: _____
	Account #: _____
Monthly payment amount: \$ _____	Whose Debt: _____
Amount Owed _____	
Are you behind on your payments? If yes, how much? \$ _____	
Is there a co-debtor? If yes, provide name and address. _____ _____ _____	
Collateral: _____	
Have you made arrangements with your lender concerning delinquent payments? Yes No If yes, please explain	

**Priority Creditors:**

What is a priority debt?

A priority debt is a tax or administrative debt. The Internal Revenue Service and other taxing authorities are the best examples of priority debt. However, there are circumstances where the IRS could also be a secured or even an unsecured debt.

**IRS Debt:**

1. Do you have any unfiled returns? Yes    No  
If yes, please explain: \_\_\_\_\_
2. Have you been notified or are you otherwise aware that any of your federal, state or local tax returns are being examined or are you under investigation? Yes    No  
If yes, please explain: \_\_\_\_\_
3. Have you submitted an offer to compromise any of your taxes? Yes    No  
If yes, please explain: \_\_\_\_\_
4. Have you signed an extension of the statutory limitation period applicable to any taxes? Yes    No  
If yes, please explain: \_\_\_\_\_
5. Have any federal or state tax liens been filed against you? Yes    No  
If yes, please explain: \_\_\_\_\_

**Property Taxes:**

Tax Years: _____	Form #: _____
Amount Owed:     \$_____	Whose Debt: _____
Tax Years: _____	Form #: _____
Amount Owed:     \$_____	Whose Debt: _____
Tax Years: _____	Form #: _____
Amount Owed:     \$_____	Whose Debt: _____
Tax Years: _____	Form #: _____
Amount Owed:     \$_____	Whose Debt: _____

Taxing Authority Name and Address:		_____
		_____
		_____
Years Owed:	_____	Account Number: _____
Amount Owed:	\$_____	Whose Debt: _____
Collecting Attorney Name and Address:		_____
		_____
		_____

Taxing Authority Name and Address:		_____
		_____
		_____
Years Owed:	_____	Account Number: _____
Amount Owed:	\$_____	Whose Debt: _____
Collecting Attorney Name and Address:		_____
		_____
		_____

**Unsecured Creditors:**

What is unsecured debt?

An unsecured debt is one in which the creditors do not have any collateral to secure payment of your debt. Examples of unsecured debt include most credit cards, medical bills and signature loans, as well as deficiencies that remain after a secured creditor repossesses and sells its collateral but the proceeds from the sale do not pay off the debt. Purchases of appliances, furniture, televisions, VCR's, DVD players, stereos, computers, jewelry, etc. purchased on universal cards such as Visa, Master Card, American Express and Discover are unsecured. As noted above, these same items, when purchased on department store credit cards, can be secured.

Please list all of your unsecured creditors. Under type of account please put credit card, medical bill, signature loan, utility bill, etc.

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

Name:	_____	Account #:	_____
Address:	_____	Date Incurred:	_____
	_____	Amount Owed:	\$ _____
Type of Account:	_____	Whose Debt:	_____
Codebtor Name:	_____	Collection Agency:	_____
Address:	_____	Address:	_____
	_____		_____

**Executory Contracts/Unexpired Leases:**

What are executory contracts?

Executory contracts include contracts for services, contracts for deed, contracts for sale, etc.

What are unexpired leases?

Leases include apartment leases, house leases, car leases, etc.

Name:	_____
Address:	_____ _____
Description of Contract:	_____
Do you want to assume or reject this contract?	Assume      Reject
Is the contract in default?	Yes    No

Name:	_____
Address:	_____ _____
Description of Contract:	_____
Do you want to assume or reject this contract?	Assume      Reject
Is the contract in default?	Yes    No

**\*If you are in default, please list as an unsecured creditor in creditor section of this questionnaire.\***

## Income

**Debtor:**

How often do you get paid?

- |                          |              |  |                    |
|--------------------------|--------------|--|--------------------|
| <input type="checkbox"/> | Monthly      | You get paid one each month  | 12 checks per year |
| <input type="checkbox"/> | Semi-Monthly | You get paid twice each month (e.g. 1 <sup>st</sup> & 15 <sup>th</sup> ) | 24 checks per year |
| <input type="checkbox"/> | Bi-Weekly    | You get paid every other week (e.g. every other Friday)                  | 26 checks per year |
| <input type="checkbox"/> | Weekly       | You get paid once each week  | 52 checks per year |

<u>Income from your Paystub</u>	<u>Other Monthly Income</u>
Gross Income: \$ _____	From your business: \$ _____ (attach year to date income statement)
Payroll Deductions: \$ _____	From real property: \$ _____ (attach year to date income statement)
Federal Income Tax: \$ _____	Interest & Dividends: \$ _____
FICA/Medicare: \$ _____	Alimony, Child Support: \$ _____
Insurance: \$ _____	Social Security/Government Assistance: \$ _____
Retirement: \$ _____	_____ : \$ _____ (Other, specify)
Union Dues: \$ _____	_____ : \$ _____ (Other, specify)
_____ : \$ _____ (Other, specify)	_____ : \$ _____ (Other, specify)

Explain any anticipated increase or decrease in income of more than 10% in the next year:

**Spouse:**

How often do you get paid?

- Monthly      You get paid one each month      12 checks per year
- Semi-Monthly      You get paid twice each month (e.g. 1<sup>st</sup> & 15<sup>th</sup>)      24 checks per year
- Bi-Weekly      You get paid every other week (e.g. every other Friday)      26 checks per year
- Weekly      You get paid once each week      52 checks per year

<u>Income from your Paystub</u>	<u>Other Monthly Income</u>
Gross Income:      \$_____	From your business:      \$_____
Payroll Deductions:      \$_____	(attach year to date income statement)
Federal Income Tax:      \$_____	From real property:      \$_____
FICA/Medicare:      \$_____	(attach year to date income statement)
Insurance:      \$_____	Interest & Dividends:      \$_____
Retirement:      \$_____	Alimony, Child Support:      \$_____
Union Dues:      \$_____	Social Security/Government
_____ :      \$_____	Assistance:      \$_____
(Other, specify)	_____ :      \$_____
_____ :      \$_____	(Other, specify)
(Other, specify)	_____ :      \$_____
	(Other, specify)

Explain any anticipated increase or decrease in income of more than 10% in the next year:

**Expenses:**

Rent or Mortgage \$\_\_\_\_\_

Includes Insurance

Includes Taxes

Utilities

Electricity/Gas \$\_\_\_\_\_

Water & Sewer \$\_\_\_\_\_

Telephone \$\_\_\_\_\_

\_\_\_\_\_ \$\_\_\_\_\_

Other, specify

Home Maintenance \$\_\_\_\_\_

Food \$\_\_\_\_\_

Clothing \$\_\_\_\_\_

Laundry & Dry Cleaning \$\_\_\_\_\_

Medical & Dental Expenses \$\_\_\_\_\_

Transportation \$\_\_\_\_\_

(Do NOT include car payment)

Recreation \$\_\_\_\_\_

Charitable Contributions \$\_\_\_\_\_

Insurance

Homeowners \$\_\_\_\_\_

Life \$\_\_\_\_\_

Health \$\_\_\_\_\_

Auto \$\_\_\_\_\_

\_\_\_\_\_ \$\_\_\_\_\_

Other, specify

\_\_\_\_\_ \$\_\_\_\_\_

Taxes, specify

Installment Payments

Auto #1	\$ _____
Auto #2	\$ _____
Auto #3	\$ _____
_____	\$ _____
Other, specify	
_____	\$ _____
Other, specify	
Alimony, maintenance, support	\$ _____
Payments for Dependents (not living at home)	\$ _____
Business Expenses (Attach Year to Date Income Statement)	\$ _____
Other Expenses (specify)	
_____	\$ _____
_____	\$ _____
_____	\$ _____

## Statement of Financial Affairs

**ALL QUESTIONS IN THIS SECTION REQUIRE AN ANSWER. IF A QUESTION DOES NOT APPLY, PLEASE INDICATE WITH BY WRITING "NONE" OR "NOT APPLICABLE" IN THE ANSWER SPACE.**

If you are filing jointly with your spouse, include information about both you and your spouse. If you are filing under Chapter 13, and you are married and not separated, you must provide information about your spouse even if you are not filing jointly.

Questions 1 - 18 are to be completed in all cases. Clients that are or have been in business, also must complete questions 19 - 25.

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1. **Income from employment or operation of business:**

State your gross income from employment or operation of business.

<b>Year</b>		<b>Gross Amount</b>	<b>Source (if more than one)</b>
<b>2004</b>	Debtor		
	Spouse		
<b>2003</b>	Debtor		
	Spouse		
<b>2002</b>	Debtor		
	Spouse		

**\*\*Please provide copies of your tax returns for 2003 and 2002.\*\***

2. **Income other than from employment or operation of business:**

State the amount of income received, other than from employment or operation of business, during the **two years** immediately preceding the commencement of this case.

		<b>Gross Amount</b>	<b>Source</b>
<b>Previous 12 Months</b>	Debtor		
	Spouse		
<b>Previous 13 to 24 Months</b>	Debtor		
	Spouse		

3. **Payments to Creditors:**

(a) List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600, to any creditor made within **90 days** immediately preceding the commencement of this case.

<b>Name and Address of Creditor</b>	<b>Dates of Payments</b>	<b>Amount Paid</b>	<b>Amount Still Owed</b>

(b) List all payments made within **one year** immediately preceding the commencement of this case to creditors who were “insiders.” (“Insiders” include your relatives, your business partners and their relatives, your corporation, or your affiliates.)

Name, Address and Relationship of Creditor	Dates of Payments	Amount Paid	Amount Still Owed

4. **Suits, Execution, Garnishments and Attachments:**

(a) List all suits and administrative proceedings to which you are or were a party within **one year** preceding the filing of this case.

Caption of Suit and Case Number	Nature of Proceeding	Court or Agency and Location	Status or Disposition

**\*\*Attach copies of documents for any law suits.\*\***

(b) Describe all property that has been garnished, seized, or attached under any legal or equitable process within **one year** immediately preceding the commencement of this case.

Name and Address of Person/Company for Whom the Property Was Seized (creditor)	Dates of Seizure	Description and Value of Property

5. **Repossessions, Foreclosures, and Returns:**

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure, or returned to the seller within **one year** immediately preceding commencement of this case.

Name and Address of Creditor	Dates of Repossession, Foreclosure, Transfer or Return	Description and Value of Property

6. **Assignments and Receiverships:**

(a) Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case.

Name and Address of Assignee	Date of Assignment	Terms of Assignment/Settlement

(b) List all property which has been in the hands of custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case.

Name and Address of Custodian	Name and Location of Court, Case Title and Number	Date of Order	Description and Value of Property

7. **Gifts**

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient.

Name and Address of Recipient	Relationship to You, if Any	Date of Gift	Description and Value of Gift

8. **Losses**

List all losses from fire, theft, gambling or other casualty within **one year** immediately preceding the commencement of this case **or since the commencement of this case.**

Description and Value of Property	Description of Circumstances and Amount Covered by Insurance, if Any	Date of Loss

9. **Payments related to debt counseling or bankruptcy**

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning bankruptcy, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of the case.

Name and Address of Payee	Date of Payment	Name of Person Who Paid, if Not You	Amount of Money/Description and Value of Property

10. **Other transfers, (including sale of your property)**

List all other property, other than property transferred in your ordinary course of business or financial affairs, transferred either absolutely, or as a security within **one year** immediately preceding the commencement of this case.

Name and Address of Transferee and Relationship to You	Date of Transfer	Description of Property Transferred and Value Received

11. **Closed Financial Accounts**

List all financial accounts and instruments held in your name or for your benefit which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case.

Name and Address of Institution	Type and Number of Account & Final Balance	Amount and Date of Sale or Closing

**12. Safe Deposit Boxes**

List each safe deposit or other box or depository in which you have or have had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case.

Name and Address of Bank or Other Depository	Name and Address of Those with Access to Box or Depository	Description of Contents	Date of Transfer, or Surrender, if Any

**13. Setoffs**

List all setoffs made by any creditor, including a bank, against a debt or deposit of yours within **90 days** preceding the commencement of this case.

Name and Address of Creditor	Date of Setoff	Amount of Setoff

**14. Property Held for Another Person**

List all property you hold or control that is owned by another person.

Name and Address of Owner	Description and Value of Property	Location of Property

**15. Prior Address**

If you have moved within the **two years** immediately preceding the commencement of this case, list all residences during that time, excluding your present address:

Address	Your Name at the Time	Dates of Occupancy

**16. Spouses and Former Spouses**

If you live or have lived in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six years** immediately preceding the commencement of the case, identify the name of your spouse or any former spouse who resides or resided in the community property state.

Name and Address

**17. Environmental Information**

For the purpose of this question, the following definitions apply:

**Environmental Law:** means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium including, but not limited to statutes or regulations regulating the cleanup of these substances, wastes, or materials.

**Site:** means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

**Hazardous Material:** means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term under an Environmental Law.

- (a) List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and if known the Environmental Law.

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law

- (b) List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law

- (c) List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

Name and Address of Governmental Unit	Docket Number	Status or Disposition

**18. Nature, Location and Name of Business**

- (a) List the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

Name, Address and Taxpayer I.D.	Nature of Business	Beginning and Ending Dates of Operation

- (b) Identify any business listed in response to subdivision a., above, that is “single asset real estate.” “Single asset real estate” means real property constituting a single property or project, other than residential real property with fewer than 4 residential units, which generates substantially all of the gross income of a debtor and on which no substantial business is being conducted by a debtor other than the business of operating the real property activities incidental thereto having aggregate non-contingent, liquidated secured debts in an amount no more than \$4,000,000.

Name	Address

**Complete this section if you have owned more than 5% of a business or been an officer, director or manager of a business within the past 72 months.**

The following questions are to be completed by every client that is or has been, within the **six years** immediately preceding the filing of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self employed.

**19. Books, Records and Financial Statements**

- (a) **Bookkeepers and Accountants within past 24 months.**

List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of your books of account and records.

Name and Address	Dates Services Rendered

**(b) Auditors and Preparers of Financial Statements within past 24 months**

List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case, have audited the books of account and records, or prepared a financial statement of the debtor.

Name	Address	Dates Services Rendered

**(c) People in Possession of books and records**

List all firms or individuals who at the time of the filing of this case were in possession of your books of account and records. If any of the books of account or records are not available, explain.

Name	Address

**(d) People who got Financial Statements within past 24 months**

List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement were issued within the **two years** immediately preceding the commencement of this case.

Name and Address	Date Issued

**20. Inventories**

**(a) Last 2 Inventories**

List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

Date of Inventory	Inventory	Supervisor	Dollar Amount (Specify cost, market or other)

**(b)** List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

Date of Inventory	Name and Address of Custodian of Inventory Records

21. **Current Partners, Officers, Directors and Shareholders**

- (a) If your business is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

Name and Address	Nature of Interest	Percentage of Interest

- (b) If your business is a corporation, list all officers and directors of the corporation and each stockholder who directly or indirectly owns, controls or holds 5% or more of the voting securities of the corporation.

Name and Address	Title	Nature and Percentage of Stock Ownership

22. **Former Partners, Officers, Directors and Shareholders**

- (a) If your business is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

Name and Address	Date of Withdrawal

- (b) If your business is a corporation, list all officers or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

Name and Address	Date of Withdrawal

**23. Withdrawals from a Partnership or Distributions by a Corporation**

If your business is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

Name and Address of Recipient and Relationship to you	Date and Purpose of Withdrawal	Amount of Money or Description and Value of Property

**24. Tax Consolidation Group**

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of the case.

Name of Parent Corporation	Taxpayer Identification Number

25. **Pension Funds**

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of the case.

Name of Pension Fund	Taxpayer Identification Number

## Certification

I/we have carefully prepared and reviewed this workbook. Every question has been read, and, to the best of my/our knowledge, my/our answers are accurate and complete. Every creditor has been listed, along with their complete address. To the extent possible, I/we have listed any account numbers and I/we have been as accurate as possible regarding the amounts owed. I/we have not omitted any asset(s) from this workbook. I/we understand that this workbook will be used to prepare our bankruptcy filing and that any incompleteness or inaccuracy could have an adverse impact on the bankruptcy. I/we further understand that it is my/our responsibility to immediately inform my/our attorney if any of my/our answers to any of the questions in this workbook change after the workbook is returned to the attorney.

I/we further understand that, even though I/we are required to list all of my/our creditors in my/our bankruptcy petition, there is no guarantee that all of your debts will be discharged in bankruptcy.

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Please enclose copies of:

- ✓ Your driver's license
- ✓ Your social security card
- ✓ Your last three bank statements
- ✓ A document with the legal description of any real estate
- ✓ Any pending lawsuits
- ✓ Any judgments