

BANKRUPTCY QUESTIONNAIRE

Bankruptcy is a right provided by law to people who are deeply in debt and in need of a fresh start. Bankruptcy will discharge many of your debts and you will not have to pay them except, in some cases, secured debts for the purchase of a particular item or debts on which you gave a mortgage or put up some other property as collateral.

The law allows you to keep some money and most types of essential necessities in bankruptcy. To receive this protection, it is important that you list all items asked for in the following questions: if you do not list an item, that item will not be protected in bankruptcy. You must also list everyone to whom you owe money. If you leave out one of your creditors, you may have to pay the money to that creditor or you may lose your right to bankruptcy. It may also be considered a crime if you intentionally give false information or leave out information. If you have any questions about whether you can keep certain property or whether you should list a debt, write that question down and remember to ask the lawyer. We know this questionnaire is long. Preparing your bankruptcy papers take a lot of time and a lot of information. If we work together on this, we can protect your family from a great hardship and give you the new start the law intends you to have.

(1) Fill out EVERY question on all pages. Wherever you are given a choice of YES or NO on these forms, check either YES or NO, whichever is correct. Please fill out these pages as well as you can. We cannot file the bankruptcy papers unless we have ALL the requested information. Please call us if you don't understand a question.

(2) Write clearly or typewrite you answers. We MUST be able to read them clearly.

(3) Wherever the name of a person or company is asked for, **GIVE THE FULL ADDRESS.** Make sure the address is correct. **YOUR DISCHARGE FROM EACH DEBT DEPENDS UPON A COMPLETE AND CORRECT MAILING ADDRESS.**

(4) If you don't know the exact amount you owe on a debt, fill in a HIGH estimate. Do NOT leave the amount blank or say you "don't know".

(5) Whenever you need more room, put the information on a separate sheet of paper with the number of the question.

(6) List **EVERY CREDITOR** and **EVERYBODY** that has anything to do with your debts, including co-signers. If a bill has been turned over to a collection agency or an attorney, list **BOTH** the person you originally owed AND the collection agency or attorney, giving the **FULL ADDRESS** of each. IF the collection agency has an attorney, list the person you originally owed, the collection agency, and the attorney, giving the address of each.

(7) Whenever a question asks you to be prepared to give details, gather all papers concerning the matter, including bills and collection letters, and return them with this questionnaire when you complete it. In any event, but sure to provide us with the following items if you have any:

- (a) Deeds and mortgages on you house or other real estate;
- (b) Any insurance policies;
- (c) Any papers relating to any past bankruptcies you may have filed; and a copy of your latest paystubs;
- (d) Copies of your state and federal tax returns for the past two years, and a copy of your latest paystubs;
- (e) Legal papers, lawsuits, divorce papers, etc.
- (f) Any other papers you have concerning any of your debts; and
- (g) Any lease, credit agreement, installment contract, etc. that you have signed and that is still in effect or not fully paid.

(8) **COMPLETE ALL QUESTIONS!** Whenever the word “you” appears in this questionnaire, this refers to both you and your spouse, unless otherwise indicated. If you are separated from you spouse and there is no possibility that your spouse will file bankruptcy with you, you don’t have to answer the questions about your spouse.

NAME AND RESIDENCE INFORMATION

1. Type of Debtor: Individual Joint

2. Marital Status: Single Married Separated Divorced Widow/Widower

HUSBAND (or INDIVIDUAL)

2. Your full name including your middle name: _____

3. Your physical address: _____

Your mailing address: _____

County of Residence: _____

4. Home Telephone number: _____ Cell Phone: _____

5. Are you a US Citizen: Yes No

7. Your social security number: _____ 8. Male Female

9. List any other names you have used (including maiden name), or other ways you have signed papers and checks during the past six years: _____

WIFE (if filing jointly)

10. Your full name including your middle name: _____

11. Your physical address: _____

Your mailing address: _____

County of Residence: _____

12. Home Telephone number: _____ Cell Phone: _____

13. US Citizen: Yes No

15. Your social security number: _____

16. List any other names your spouse has used (including maiden name), or other ways your spouse has signed paper, checks during the last six years: _____

17. Have you (or your spouse, if filing jointly) filed a homestead deed or bankruptcy before?
 Yes No

If yes, please give details and bring all papers relating to it.

REAL ESTATE AND PERSONAL PROPERTY

A. REAL ESTATE. Do you (or your spouse, if filing jointly) own any real estate? If so, provide the following information and bring in a copy of your deed:

1. Describe and give the address and location of all real estate (including a lot, house, parcel of land, burial plot, etc.) in which you hold any interest: _____

2. Who owns this property? Husband Wife Joint

3. Are there any other co-owners? If so, please list them: _____

4. What is the total value of this real estate? _____

5. Is there a mortgage on this property? If so, what bank or other financial institution holds the mortgage? _____

***Be sure to list this mortgage as a secured debt under the Secured Debts section of this questionnaire. If not, please go back to that section and do so!** If there are more than one mortgage on the property, make sure you list them all. If you own more than one tract of real estate, provide the above information for each tract of real estate that you own.

B. PERSONAL PROPERTY.

1. What is the total of all **CASH** you have on you that is not deposited in an account? _____

2. Identify each every **ACCOUNT** you have now with the ability to withdraw funds from:

Name of Bank _____

Address _____

Type of Account _____ Account Number _____

Who owns this account? _____; Date opened? _____

Balance in this account? _____

Name of Bank _____

Address _____

Type of Account _____ Account Number _____

Who owns this account? _____; Date opened? _____

Balance in this account? _____

Name of Bank _____

Address _____

Type of Account _____ Account Number _____

Who owns this account? _____; Date opened? _____

Balance in this account? _____

3. Identify each and every unrefunded **DEPOSIT** with public utilities, telephone companies, landlords, and others:

Name of holder: _____

Address: _____

Type of Account, i.e. landlord, utility, lay-a-way, escrow: _____

Who deposited the funds? _____

Balance in this account? _____; As of what date? _____

Name of holder: _____

Address: _____

Type of Account, i.e. landlord, utility, lay-a-way, escrow: _____

Who deposited the funds? _____

Balance in this account? _____; As of what date? _____

4. List all **HOUSEHOLD GOOD AND FURNISHINGS**, including audio, video and computer equipment:

LIST LIVING ROOM/DEN FURNISHINGS:

Items	Quantity	Replacement Value	Who owns it? Circle ONE D = Debtor S = Spouse J = Joint
Chairs	_____	\$ _____	D S J
Sofas	_____	\$ _____	D S J
Loveseats	_____	\$ _____	D S J
End tables	_____	\$ _____	D S J
Coffee tables	_____	\$ _____	D S J
TVs	_____	\$ _____	D S J

VCRs	_____	\$ _____	D	S	J
DVD players	_____	\$ _____	D	S	J
Stereo sets	_____	\$ _____	D	S	J
Telephones	_____	\$ _____	D	S	J
Clocks	_____	\$ _____	D	S	J
Lamps	_____	\$ _____	D	S	J
Armoires	_____	\$ _____	D	S	J
Bookcases	_____	\$ _____	D	S	J
Window dressings/curtains		\$ _____	D	S	J
Other:	_____	\$ _____	D	S	J

LIST OTHER DECORATIVE ITEMS (rugs, wall hangings, curios, etc...):

_____	_____	\$ _____	D	S	J
_____	_____	\$ _____	D	S	J

LIST KITCHEN/DINING ROOM FURNISHINGS:

Kitchen Table/chairs		\$ _____	D	S	J
Dining Room table/chairs		\$ _____	D	S	J
Hutch	_____	\$ _____	D	S	J
China cabinet/closet	_____	\$ _____	D	S	J
Washer	_____	\$ _____	D	S	J
Dryer	_____	\$ _____	D	S	J
Oven/Range	_____	\$ _____	D	S	J
Microwave/Convection Oven		\$ _____	D	S	J
Refrigerator	_____	\$ _____	D	S	J
Freezer	_____	\$ _____	D	S	J
Window dressings/curtains		\$ _____	D	S	J

Other items: _____ \$ _____ D S J

DISHES:

Glass _____ \$ _____ D S J

China _____ \$ _____ D S J

Crystal _____ \$ _____ D S J

Other: _____ \$ _____ D S J

Pots/Pans _____ \$ _____ D S J

LIST BEDROOM FURNISHINGS:

Beds and Bedding _____ \$ _____ D S J

Night tables _____ \$ _____ D S J

Dressers _____ \$ _____ D S J

Chests of drawers _____ \$ _____ D S J

Window dressings/curtains _____ \$ _____ D S J

Other: _____ \$ _____ D S J

5. List **BOOKS, PICTURES, and OTHER ART OBJECTS**: antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.

Books _____ \$ _____ D S J

Pictures _____ \$ _____ D S J

Other _____ \$ _____ D S J

Other _____ \$ _____ D S J

Antiques: _____ \$ _____ D S J

Collections _____ \$ _____ D S J

Collections _____ \$ _____ D S J

Other _____ \$ _____ D S J

6. List **CLOTHING** (wearing apparel)

_____	_____	\$ _____	Debtor
_____	_____	\$ _____	Spouse
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

7. List **FURS AND JEWELRY**

Wedding Rings	_____	\$ _____	Debtor
Wedding Rings	_____	\$ _____	Spouse
Other	_____	\$ _____	D S J
Other	_____	\$ _____	D S J
Other	_____	\$ _____	D S J
Other	_____	\$ _____	D S J

8. List **FIREARMS, SPORTS, PHOTOGRAPHIC**, and other **HOBBY** equipment.

_____	_____	\$ _____	D S J
_____	_____	\$ _____	D S J
_____	_____	\$ _____	D S J
_____	_____	\$ _____	D S J
_____	_____	\$ _____	D S J
_____	_____	\$ _____	D S J

9. List **INSURANCE POLICIES**. Name of insurance company of each policy, itemize cash surrender value of each policy, indicated whether your policy allows you to change the beneficiary.

Owner of the policy: _____

Name of Insurance Company _____

Type of policy _____ Cash surrender value _____

Face value of policy (amount payable upon death) _____

As of what date _____ Is the beneficiary irrevocable? _____

Owner of the policy: _____

Name of Insurance Company _____

Type of policy _____ Cash surrender value _____

Face value of policy (amount payable upon death) _____

As of what date _____ Is the beneficiary irrevocable? _____

10. **ANNUITIES.** Itemize and name each issuer.

Owner of annuity: _____

Name of Issuer: _____

Account Number _____

Value of annuity: _____ as of what date? _____

11. Interests in **IRA, ERISA, KEOGH, 401(k)** or other pension or profit sharing plans. Itemize.

Name of Plan _____

Type _____ Account number _____

Accumulated value _____ D S

Is the plan "ERISA" qualified (Employee Retirement Income Security Act of 1974)? Y N
(Your employer, trustee, or plan administrator will be able to answer this question)

Name of Plan _____

Type _____ Account number _____

Accumulated value _____ D S

Is the plan "ERISA" qualified (Employee Retirement Income Security Act of 1974)? Y N
(Your employer, trustee, or plan administrator will be able to answer this question)

12. List stock and interests in incorporated and unincorporated business

Name of business: _____

Who owns it? D or S

What type of business is it? (S corp, C corp, LLC, sole proprietorship, etc...)? _____

What is the percentage of your interest in the business? _____

How many shares do you hold? _____ Is the stock publicly traded? _____

If yes, provide name and symbol: _____

Replacement value? _____ As of what date? _____

What method did you use to estimate the value? _____
(provide a balance sheet if available)

13. Interests in partnerships or joint ventures.

Name of partnership or joint venture: _____ Who owns it? D or S

Type of partnership? _____ % of your interest in the partnership: _____

What type of interest do you hold? (general or limited?) _____

14. Government or corporate bonds and other negotiable and non-negotiable instruments

What type of bond? _____ Who owns it? D or S

OR whose Social Security number is on the face of the bond? _____

Face value of bond: _____ If you cashed it today, what amount would you receive? _____

15. Accounts Receivable

\$ _____; as of what date? _____

16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.

_____ Who is entitled? D or S

17. Other liquidated debts owing debtor including tax refunds (tax return filed but the refund has not been received). Give particulars.

_____ Debtor How much was last year's
_____ Spouse refund? _____
_____ Joint

18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule or Real Property.

_____ Debtor
_____ Spouse
_____ Joint

19. Contingent and non-contingent interest in estate of a decedent, death benefit plan, life insurance policy, or trust.

_____ Debtor
_____ Spouse
_____ Joint

20. Other contingent and unliquidated claims of every nature, including tax refunds (prorated tax refund), counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.

Possible Inheritance? Debtor

Possible Inheritance? Spouse

Any Other? Describe: _____

21 Automobiles, trucks, trailers, and other vehicles and accessories.

Year: _____ Make: _____ Model: _____

VIN: _____ Mileage: _____

Who owns it (whose name is it registered in)? _____

Is there a lien on the vehicle? _____ Was the lien money used to purchase the vehicle? _____

Is there is a lien, provide the name and address of the creditor:

Name: _____

Address: _____

Account Number: _____

How much do you owe? _____ Do you intend to keep the vehicle? Y or N

Year: _____ Make: _____ Model: _____

VIN: _____ Mileage: _____

Who owns it (whose name is it registered in)? _____

Is there a lien on the vehicle? _____ Was the lien money used to purchase the vehicle? _____

Is there is a lien, provide the name and address of the creditor:

Name: _____

Address: _____

Account Number: _____

How much do you owe? _____ Do you intend to keep the vehicle? Y or N

22. Boats, Motorcycles, 4-Wheelers, Campers, Tractors, etc...

<u>Year</u>	<u>Model</u>	<u>Description</u>	<u>Value</u>	<u>Loan</u>
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(1) _____

(2) _____

(3) _____

23. Office equipment, furnishings, and supplies

Give a description or attach a list: _____

Who owns it? _____ Provide the book value: _____

What method of depreciation did you use? _____

If the book value is not applicable, provide a replacement value: _____

25. Animals

Describe: _____

Are they pets? _____ If the animals are not pets, please describe: _____

What is the replacement value? _____ What is the basis of the valuation? _____

26. Other personal property of any kind not already listed. Itemize.

Give a description or provide a list:

Who owns it? _____

Provide the value: _____

Is there a lien? _____

If yes, provide the creditor/lienholder's name and address: _____

How much do you owe? _____

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*** Please attach your two most current statements**

Creditor's name: _____ collateral	Reason for debt: to purchase the property serving as
Current Mailing Address: _____ _____	or to borrow money for something else
Account No: _____ _____	Description of property serving as collateral for the debt? _____
Amount still owed? _____ _____	How much is it worth now?
What are your monthly payments? _____	How many months are you behind? _____
Date you incurred the debt? _____	Has the creditor turned you over to a collection Agency or attorney? Yes ____ No ____
Who owes this debt: Husband Wife Both of you jointly	If yes, please list below: Name and address of any collection agency or attorney: _____ _____ _____
Which do you intend to do? Give up the property Keep the property and try to make payments	Has this creditor, collection agency or attorney Taken action such as a lawsuit, repossession, or garnishment? Yes ____ No ____
Did anyone else co-sign for this debt? Yes ____ No ____	If yes, please list details on page(s) 29, 30, 31
If yes, give their name and address below: _____ _____ _____	

UNSECURED PRIORITY DEBTS

1. If you or your spouse employed anyone (such as regular employees in a business you operated, baby-sitters, etc.), do you still owe them any wages? If so, give the name and address of the employee, the dates for which you owe them the amount you owe them, and the work done by them:

2. Have you or your spouse operated a business in which you owe money to an employee benefit plan? If so, give details and bring this to your attorney's attention:

3. Has anyone paid you a security deposit which you are still holding? Has anyone paid you to do work for them that you have not done? Has anyone paid you to purchase something from you that you have not given to them? If so, give details and bring this to your attorney's attention:

4. Do you or your spouse owe any taxes (income tax or other tax) to the United States? If so provide the following information:

Name and Address of U.S. Agency or Department: _____

Type of Tax (for example, income tax, self-employment tax): _____

Amount(s) Owed (give year for each amount): _____

Who is liable for the tax (you, spouse, or both)? _____

5. Do you or your spouse owe any taxes to the Commonwealth of Virginia or any other state? If so, provide the following information:

Name and Address of Tax Agency: _____

Type of Tax (for example, income tax): _____

Amount(s) Owed (give year for each amount): _____

Who is liable for the tax (you, spouse, or both)? _____

6. Do you or your spouse owe any taxes to a county, district or city? If so, provide the following information:

Name and Address of Tax Agency: _____

Type of Tax (for example, personal property, real estate, etc.): _____

Amount(s) Owed (give year for each amount): _____

Who is liable for the tax (you, spouse, or both): _____

GENERAL UNSECURED DEBTS

In this section of the questionnaire, you should list all your other debts that you have not already listed in the previous sections. These are your general unsecured debts. There is a separate box for you to list each of them. If you have more than 19 such debts (the number of boxes we have provided in this section), please list the additional debts on a blank sheet of paper, making sure you provide all the information requested for each debt.

It is extremely important that you list ALL creditors that you have not already listed in the previous sections. Include creditors who have judgments against you as well as those who don't. Include creditors whose claims you dispute. Anyone who you think may have a claim against you should be listed, even if the claim is very old. **It is ESSENTIAL that you include all the information requested AND TWO (2) STATEMENTS FROM THE PAST 60 DAYS. Don't forget to include all of the following, as well as any other types of debts you owe:**

medical bills
credit card bills
store charges
back rent
child support

loan companies
loans from relatives
mail order bills
welfare debts
subscriptions

utility companies
judgments
student loans
schools
alimony/spousal support

creditors who have repossessed your property but claim you still owe them money
debts you've co-signed for someone else
money you've borrowed for someone else
debts from prior marriages that were never paid off
overpayments you've received from such programs as unemployment compensation, food stamps, ADC, Social Security, etc.

Creditor's name: _____ _____	Kind of Debt: _____
Address: _____ _____	Account No: _____
Monthly Payment _____ collection	Has the creditor turned you over to a Agency or attorney? Yes ____ No ____
Amount still owed? _____	If yes, please list name and address below:

Date you incurred the debt? _____

Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

Did anyone else co-sign for this debt? Yes ____ No ____

If yes, give their name and address below:

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Has this creditor, collection agency or attorney taken action such as a lawsuit, repossession, or garnishment? Yes ____ No ____

If yes, please list details on page(s) 29, 30,

Creditor's name: _____

Address: _____

Monthly Payment _____
collection

Amount still owed? _____

Date you incurred the debt? _____

Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

Did anyone else co-sign for this debt? Yes ____ No ____

If yes, give their name and address below:

31

Kind of Debt:

Account No: _____

Has the creditor turned you over to a

Agency or attorney? Yes ____ No ____

If yes, please list name and address below:

Creditor's name: _____

Address: _____

Kind of Debt:

Account No: _____

Monthly Payment _____
collection _____

Amount still owed? _____

Date you incurred the debt? _____

Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

Did anyone else co-sign for this debt? Yes _____ No _____

If yes, give their name and address below:

31

Has the creditor turned you over to a

Agency or attorney? Yes _____ No _____

If yes, please list name and address below:

Has this creditor, collection agency or attorney
taken action such as a lawsuit, repossession, or
garnishment? Yes _____ No _____

If yes, please list details on page(s) 29, 30,

Creditor's name: _____

Address: _____

Monthly Payment _____
collection _____

Amount still owed? _____

Date you incurred the debt? _____

Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

Did anyone else co-sign for this debt? Yes _____ No _____

If yes, give their name and address below:

31

Kind of Debt: _____

Account No: _____

Has the creditor turned you over to a

Agency or attorney? Yes _____ No _____

If yes, please list name and address below:

Has this creditor, collection agency or attorney
taken action such as a lawsuit, repossession, or
garnishment? Yes _____ No _____

If yes, please list details on page(s) 29, 30,

Creditor's name: _____

Kind of Debt:

Address: _____

Account No: _____

Monthly Payment _____
collection

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Agency or attorney? Yes ____ No ____

Amount still owed? _____

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Date you incurred the debt? _____

Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

Did anyone else co-sign for this debt? Yes ____ No ____

If yes, give their name and address below:

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If yes, please list details on page(s) 29, 30,

Creditor's name: _____

Kind of Debt:

Address: _____

Account No: _____

Monthly Payment _____
collection

Has the creditor turned you over to a

Agency or attorney? Yes ____ No ____

Amount still owed? _____

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Date you incurred the debt? _____

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If yes, give their name and address below:

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If yes, please list details on page(s) 29, 30,

Creditor's name: _____

Kind of Debt: _____

Address: _____

Account No: _____

Monthly Payment _____
collection

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Agency or attorney? Yes ___ No ___

Amount still owed? _____

If yes, please list name and address below:

Date you incurred the debt? _____

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Did anyone else co-sign for this debt? Yes ___ No ___

If yes, give their name and address below:

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taken action such as a lawsuit, repossession, or
garnishment? Yes ___ No ___

If yes, please list details on page(s) 29, 30,

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Creditor's name: _____

Kind of Debt: _____

Address: _____

Account No: _____

Monthly Payment _____
collection

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Agency or attorney? Yes ___ No ___

Amount still owed? _____

If yes, please list name and address below:

Date you incurred the debt? _____

Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

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If yes, give their name and address below: _____

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If yes, please list details on page(s) 29, 30,

Creditor's name: _____ Kind of Debt: _____

Address: _____ Account No: _____

Monthly Payment _____ Has the creditor turned you over to a collection Agency or attorney? Yes ____ No ____

Amount still owed? _____ If yes, please list name and address below: _____

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Monthly Payment _____ collection	Has the creditor turned you over to a Agency or attorney? Yes ___ No ___ If yes, please list name and address below: _____
Amount still owed? _____	_____
Date you incurred the debt? _____	_____
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If yes, give their name and address below: _____ _____	Has this creditor, collection agency or attorney taken action such as a lawsuit, repossession, or garnishment? Yes ___ No ___ If yes, please list details on page(s) 29, 30, 31

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Address: _____ _____	Account No: _____
Monthly Payment _____ collection	Has the creditor turned you over to a Agency or attorney? Yes ___ No ___ If yes, please list name and address below: _____
Amount still owed? _____	_____
Date you incurred the debt? _____	_____
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Did anyone else co-sign for this debt? Yes ___ No ___	
If yes, give their name and address below: _____ _____	Has this creditor, collection agency or attorney taken action such as a lawsuit, repossession, or garnishment? Yes ___ No ___ If yes, please list details on page(s) 29, 30, 31

Creditor's name: _____	Kind of Debt: _____
------------------------	---------------------

Address: _____

Account No: _____

Monthly Payment _____
collection

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Amount still owed? _____

If yes, please list name and address below:

Date you incurred the debt? _____

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Did anyone else co-sign for this debt? Yes ____ No ____

If yes, give their name and address below:

Has this creditor, collection agency or attorney taken action such as a lawsuit, repossession, or garnishment? Yes ____ No ____

If yes, please list details on page(s) 29, 30,

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Creditor's name: _____

Kind of Debt: _____

Address: _____

Account No: _____

Monthly Payment _____
collection

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Agency or attorney? Yes ____ No ____

Amount still owed? _____

If yes, please list name and address below:

Date you incurred the debt? _____

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Kind of Debt:

Address: _____

Account No: _____

Monthly Payment _____
collection

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Amount still owed? _____

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If yes, please list name and address below:

Date you incurred the debt? _____

Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

Did anyone else co-sign for this debt? Yes ____ No ____

If yes, give their name and address below:

Has this creditor, collection agency or attorney

<p>_____</p> <p>_____</p> <p>31</p> <p>_____</p>	<p>taken action such as a lawsuit, repossession, or garnishment? Yes ___ No ___</p> <p>If yes, please list details on page(s) 29, 30,</p>
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<p>Creditor's name: _____</p> <p>_____</p> <p>Address: _____</p> <p>_____</p> <p>Monthly Payment _____</p> <p>collection</p> <p>Amount still owed? _____</p> <p>Date you incurred the debt? _____</p> <p>Who owes this debt: Husband Wife Both of you jointly</p> <p>Did anyone else co-sign for this debt? Yes ___ No ___</p> <p>If yes, give their name and address below:</p> <p>_____</p> <p>_____</p> <p>31</p> <p>_____</p>	<p>Kind of Debt: _____</p> <p>Account No: _____</p> <p>Has the creditor turned you over to a Agency or attorney? Yes ___ No ___</p> <p>If yes, please list name and address below:</p> <p>_____</p> <p>_____</p> <p>How many months are you behind? _____</p> <p>Has this creditor, collection agency or attorney taken action such as a lawsuit, repossession, or garnishment? Yes ___ No ___</p> <p>If yes, please list details on page(s) 29, 30,</p>
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<p>Creditor's name: _____</p> <p>_____</p> <p>Address: _____</p> <p>_____</p> <p>Monthly Payment _____</p> <p>collection</p> <p>Amount still owed? _____</p> <p>Date you incurred the debt? _____</p>	<p>Kind of Debt: _____</p> <p>Account No: _____</p> <p>Has the creditor turned you over to a Agency or attorney? Yes ___ No ___</p> <p>If yes, please list name and address below:</p> <p>_____</p> <p>_____</p>
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Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

Did anyone else co-sign for this debt? Yes ____ No ____

If yes, give their name and address below:

31

Has this creditor, collection agency or attorney taken action such as a lawsuit, repossession, or garnishment? Yes ____ No ____

If yes, please list details on page(s) 29, 30,

Creditor's name: _____

Kind of Debt:

Address: _____

Account No: _____

Monthly Payment _____
collection

Has the creditor turned you over to a

Agency or attorney? Yes ____ No ____

Amount still owed? _____

If yes, please list name and address below:

Date you incurred the debt? _____

Who owes this debt: | Husband | Wife | Both of you jointly How many months are you behind? _____

Did anyone else co-sign for this debt? Yes ____ No ____

If yes, give their name and address below:

31

Has this creditor, collection agency or attorney taken action such as a lawsuit, repossession, or garnishment? Yes ____ No ____

If yes, please list details on page(s) 29, 30,

Creditor's name: _____

Kind of Debt:

Address: _____

Account No: _____

Monthly Payment _____ collection	Has the creditor turned you over to a Agency or attorney? Yes ____ No ____ If yes, please list name and address below: _____
Amount still owed? _____	_____
Date you incurred the debt? _____	_____
Who owes this debt: Husband Wife Both of you jointly	How many months are you behind? _____
Did anyone else co-sign for this debt? Yes ____ No ____	
If yes, give their name and address below: _____ _____	Has this creditor, collection agency or attorney taken action such as a lawsuit, repossession, or garnishment? Yes ____ No ____ If yes, please list details on page(s) 29, 30, 31

PENDING (EXECUTORY) CONTRACTS AND LEASES

1. If you are presently renting your home, please provide the following information:

Landlord's name: _____

Landlord's address: _____

Is there a written lease? _____

If so, when did it begin and when does it expire? _____

How much is your monthly rent? _____

Did you pay a security deposit? Yes ____ No ____

If so, how much? _____

2. Are you involved in any of the following?

-Renting/leasing any other land or premises?

-Renting/leasing an automobile?

-Rent-to-own contracts for appliance, furniture or other items?

-Rent/purchase contract for land?

-Service contracts?

-Any other contracts or leases that have not been completed?

If so, please provide the details of the transaction(s) and attach a copy of the contract(s)

CURRENT INCOME

	<u>HUSBAND</u>	<u>WIFE</u>
Occupation:	<hr/>	<hr/>
Employer:	<hr/>	<hr/>
How long employed there:	<hr/>	<hr/>
Employer's address:		
Street or PO Box	<hr/>	<hr/>
City, State and Zip	<hr/>	<hr/>
	<u>OTHER HOUSEHOLD MEMBER</u>	<u>OTHER HOUSEHOLD MEMBER</u>
Relationship:	<hr/>	<hr/>
Occupation:	<hr/>	<hr/>
Employer:	<hr/>	<hr/>
How long employed there:	<hr/>	<hr/>
Employer's address:		
Street or PO Box	<hr/>	<hr/>
City, State and Zip	<hr/>	<hr/>

List all husband's dependents (or yours if filing individually):

<u>FULL NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List all your wife's dependents, if filing jointly:

<u>FULL NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do either you or your spouse (if filing jointly) receive any child or spousal support payments? If so, provide the following information:

Amount received per month: _____ Which of you receive it? _____

For whose support do you receive it? _____

Do either you or your spouse (if filing jointly) pay any child or spousal support payments? If so, provide the following information:

Amount paid per month: _____ Which of you pays it? _____

For whose support do you pay it? _____

CURRENT INCOME (continued)

	<u>HUSBAND</u>		<u>WIFE</u>	
	Weekly	Bi-Weekly	Weekly	Bi-Weekly
Pay period..... (Circle One)	Twice/month	Twice/month	Twice/month	Twice/month
	Monthly	Monthly	Monthly	Monthly
Gross pay per pay period	\$ _____	\$ _____	\$ _____	\$ _____
Estimated overtime per pay period	\$ _____	\$ _____	\$ _____	\$ _____
PAYROLL DEDUCTIONS	\$ _____	\$ _____	\$ _____	\$ _____
Payroll Taxes and Social Security (FICA)	\$ _____	\$ _____	\$ _____	\$ _____
Insurance	\$ _____	\$ _____	\$ _____	\$ _____
Union Dues	\$ _____	\$ _____	\$ _____	\$ _____
Other Deductions	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
Regular Income from Business, Profession or Farm ..	\$ _____	\$ _____	\$ _____	\$ _____
Income from Real Property (Rent Received)	\$ _____	\$ _____	\$ _____	\$ _____
Interest and Dividends	\$ _____	\$ _____	\$ _____	\$ _____

Alimony Received	\$ _____	\$ _____
Child Support Received	\$ _____	\$ _____
Social Security/SSI	\$ _____	\$ _____
Food Stamps	\$ _____	\$ _____
ADC/Other Public Assistance (Describe)	\$ _____	\$ _____
_____	\$ _____	\$ _____
Other Monthly Income (Describe)	\$ _____	\$ _____
_____	\$ _____	\$ _____

Itemize any income changes of more than 10% that you expect in the next 12 months:

AVERAGE MONTHLY EXPENSES

Rent, Mortgage payment and/or lot rental	\$ _____
Are real estate taxes included? _____	
Is property insurance included? _____	
Electricity and Heating Fuel	\$ _____
Water and Sewer	\$ _____
Telephone	\$ _____
Other Utilities	\$

_____	\$ _____
Home Maintenance (repairs and upkeep)	\$ _____
Food (including food stamps)	\$ _____
Clothing	\$ _____
Laundry and Dry-cleaning	\$ _____
Medical and Dental Expenses	\$ _____
Transportation (gas, oil, repairs, etc. but not car payments)	\$ _____
Recreation, clubs, and entertainment, newspaper, magazines, etc.	\$ _____
Charitable Contributions	\$ _____
Insurance (not deducted from wages or included in home mortgage payment	\$ _____
Homeowner's or renter's insurance	\$ _____

Life Insurance \$ _____
 Auto Insurance \$ _____
 Other Insurance \$ _____

Taxes not deducted from wages or included in home mortgage
 (Describe:) \$ _____

Monthly Installment Payments (for example, car payment, furniture, etc.) \$ _____
 (Describe:) \$ _____
 \$ _____
 \$ _____

Alimony and/or child support paid to someone else \$ _____

Regular expenses from operation of a business, profession or farm \$ _____
 (attach detailed explanation)

Other Expenses (for example, day care)- Describe _____
 \$ _____

STATEMENT OF FINANCIAL AFFAIRS

1. Income from Employment or Operation of Business. State the gross amount (before taxes or any deductions) you and your spouse have earned from employment or self-employment (or operation of a business) during the following periods of time:

	<u>HUSBAND</u>	<u>WIFE</u>
January 1 st to present	\$ _____	\$ _____
Employer:	_____ If self-employed, write "self-employed"	_____ If self-employed, write "self-employed"
Last year (Jan. 1 – Dec 31)	\$ _____	\$ _____
Employer:	_____ If self-employed, write "self-employed"	_____ If self-employed, write "self-employed"
Year before (Jan. 1 – Dec 31)	\$ _____	\$ _____
Employer:	_____ If self-employed, write "self-employed"	_____ If self-employed, write "self-employed"

2. Income Other than from Employment or Operation of Business. State the amount of all other income received by you or your spouse other than from employment or self-employment. Make sure

you include any money from child support, spousal support, ADC, SSI, Worker's Compensation, Unemployment Compensation, Social Security, interest, the lottery, etc.

	<u>HUSBAND</u>	<u>WIFE</u>
January 1 st to present	\$ _____	\$ _____
Source(s) of other income	_____	_____
Last year (Jan. 1 – Dec 31)	\$ _____	\$ _____
Source(s) of other income	_____	_____
Year before (Jan. 1 – Dec 31)	\$ _____	\$ _____
Source(s) of other income	_____	_____

3. Payments to Creditors. (A) Have you or yours spouse made payments to any particular creditor in the last 90 days totaling more than \$600? If so, provide the following information.

Name of Creditor: _____

Address: _____

Total amount paid in the last 90 days: _____ Amount still owed to this creditor: _____

Dates of payments: _____

(B) Have you or your spouse made any payments in the last 24 months to a relative, business associate, or relate of a business associate? If so, provide the following information.

Name of Creditor: _____ Relationship: _____

Address: _____

Total amount paid in the last 90 days: _____ Amount still owed to this creditor: _____

Dates of payments: _____

4. Suits, Executions, Garnishments, and Attachments: (A) Have either you or your spouse been sued in the last year? Have you or your spouse sued someone else in the last year? (This includes any warrants in debt filed by a creditor to get a judgment against you, any warrants tin detinue to get property from you, any motions for judgment against you, any divorce suits, any child support actions, etc.) If so, provide the following information:

Title of Lawsuit: _____ Case Number: _____

Name of Court: _____

Court's Address: _____

Reason for Lawsuit: _____

Outcome of Lawsuit: _____

Title of Lawsuit: _____ Case Number: _____

Name of Court: _____

Court's Address: _____

Reason for Lawsuit: _____

Outcome of Lawsuit: _____

Title of Lawsuit: _____ Case Number: _____

Name of Court: _____

Court's Address: _____

Reason for Lawsuit: _____

Outcome of Lawsuit: _____

PLEASE BRING IN ALL PAPERS YOU HAVE REGARDING THESE LAWSUITS!

(B) During the last year, has any of your property been levied upon or seized by the Sheriff or any of your wages or bank accounts garnished by a creditor? If so, provide the following information:

Creditor Who Caused the Levy, Seizure or Garnishment: _____

Creditor's Address: _____

Date of Levy, Seizure or Garnishment: _____

How much was this worth? _____

Creditor Who Caused the Levy, Seizure or Garnishment: _____

Creditor's Address: _____

Date of Levy, Seizure or Garnishment: _____

How much was this worth? _____

Creditor Who Caused the Levy, Seizure or Garnishment: _____

Creditor's Address: _____

Date of Levy, Seizure or Garnishment: _____

How much was this worth? _____

PLEASE BRING IN ALL PAPERS YOU HAVE REGARDING THESE!

5. Repossessions, Foreclosures and Returns. During the last 12 months, has any of your property been:

- Repossessed by a creditor?
- Given back to a creditor?
- Sold at a foreclosure sale?
- Deeded back to a creditor instead of having it foreclosed upon?

Name of Creditor or Seller: _____

Address: _____

Date of Repossession, Foreclosure, etc.: _____

What was taken or sold? _____

How much was this worth? _____

Name of Creditor or Seller: _____

Address: _____

Date of Repossession, Foreclosure, etc.: _____

What was taken or sold? _____

How much was this worth? _____

6. Assignments and Receiverships. (A) Have you given or made an assignment of any of your property for the benefit of your creditors within the last 4 months? If so please give the name and address of the assignee, the date of the assignment, and the terms of the assignment or settlement:

(B) Has any of your property been in the hands of a receiver or court-appointed official within the last year? If so, give the name and address of the custodian and court, case title and number, date of the court order, and description and value of the property: _____

7. Gifts. Other than Christmas or birthday gifts to family members worth less than \$200 and donations to churches or charities totaling less than \$100 per charity, have you made any gifts or charitable contributions within the last 12 months? If so, provide the following information:

Who received the gift? _____

Their address: _____

Relationship, if any, to you: _____ Date of gift: _____

Description and Value of Gift: _____

Who received the gift? _____

Their address: _____

Relationship, if any, to you: _____ Date of gift: _____

Description and Value of Gift: _____

8. Losses. Have you lost a substantial amount of property or money during the last year as the result of fire, theft, accident or gambling? If so, provide the following information:

What did you lose? _____

What caused the loss? _____

What was it worth? _____ Date of loss: _____

Did insurance cover any of the loss? If so, how much? _____

9. Payments Related to Debt Counseling or Bankruptcy. Have you (or someone on your behalf) given any money or property to anyone, including any attorney, for advising or assisting you with debt consolidation or bankruptcy within the last 12 months? If so, provide the following information:

Who received the money or property? _____

Their address: _____

Who gave it to them: _____

Date of payment: _____ Amount of payment: _____

10. Other Transfers. Have you sold, given away, or given a lien in any other property during the last 12 months? If so, provide the following information:

Who received the property or lien? _____

Their address: _____

Relationship, if any, to you: _____

What property was involved? _____

What did you receive in exchange? _____

Explain the transaction? _____

11. Closed Financial Accounts. During the last 12 months, have you closed, sold or otherwise transferred any of the following:

- checking account -savings account -other financial account -certificates of deposit
- shares in banks, credit unions, pension funds, cooperatives or other financial institutions

If so, provide the following information:

Name of Bank or Other Financial Institution: _____

Address: _____

Date of Repossession, Foreclosure, etc.: _____

What was taken or sold? _____

How much was this worth? _____

Name of Bank or Other Financial Institution: _____

Address: _____

Date of Repossession, Foreclosure, etc.: _____

What was taken or sold? _____

How much was this worth? _____

12. Safe Deposit Boxes. Have you had a safe deposit box anytime during the last 12 months? If so, provide the following information:

Name of Bank: _____

Address: _____

Did anyone else have access to it? If so, give their name(s) and address(es): _____

Contents of Box: _____

Do you still have the box? _____ If not, when did you surrender it? _____

13. Setoffs. During the last 90 days, has any bank or other creditor (for example, a landlord or utility company) taken a deposit of yours that they were holding because you owed them money? If so, provide the following information:

Name of Creditor: _____

Address: _____

Date Deposit Taken: _____

Name of Creditor: _____

Address: _____

Date Deposit Taken: _____

14. Property Held for Another Person. Do you have any money, property, furniture, etc. that belongs to someone else or that you are holding for someone else? If so, provide the following information:

Name of Owner: _____

Address: _____

What do you have that belongs to them? _____

What is it worth? _____ Where is it? _____

15. Prior Address of Debtor. List all other addresses where you have lived during the last 2 years:

YOU

SPOUSE

Address: _____

Address: _____

Dates of Occupancy: _____

Dates of Occupancy: _____

Name(s) Used: _____

Name(s) Used: _____

Address: _____

Address: _____

Dates of Occupancy: _____

Dates of Occupancy: _____

Name(s) Used: _____

Name(s) Used: _____

Address: _____

Address: _____

Dates of Occupancy: _____

Dates of Occupancy: _____

Name(s) Used: _____

Name(s) Used: _____

If you have lived at more than 3 other addresses during the last 2 years, please attach a sheet of paper with the other addresses and other information requested.

MISCELLANEOUS AFFAIRS

1. If you own any real estate, please list ALL judgments against you.

Creditor	Court	Date of Judgment	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Have you or your spouse been in business by yourself or with others during the last 2 years? If so, please describe the business: _____

-
3. Have you been involved in a motor vehicle accident in the last 2 years? _____
 4. Has your vehicle(s) been involved in an accident in the last 2 years, even if you were not driving? _____
 5. Have your children ever seriously injured anyone else or their property? _____
 6. Have you ever gone over your credit limit on any credit cards? _____
 7. Do you expect any major expenses (like medical bills) in the near future? _____
 8. Have you ever had a student loan, or co-signed anyone else's student loan? If so, provide the following information: Who loaned you the money? _____ How much is still owed? _____ When was the first payment due? _____ Who is trying to collect the debt? _____
 9. Have you used any of your credit cards or renewed any loans in the past 90 days?
Yes _____ No _____

CONGRATULATIONS, YOU FINALLY COMPLETED THIS THING! NOW, PLEASE CAREFULLY REVIEW THE INSTRUCTIONS, QUESTIONS, AND YOUR ANSWERS AGAIN TO MAKE SURE YOU'VE CORRECTLY AND COMPLETELY PROVIDED THE NECESSARY INFORMATION. (GO BACK AND WORK ON ALL THOSE QUESTIONS YOU SKIPPED OVER THE FIRST TIME OR TWO!) THEN GIVE US A CALL AND LET US KNOW THAT YOU'RE FINISHED SO THAT WE CAN BEGIN WORK ON THE BANKRUPTCY PAPERS RIGHT AWAY.