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Bankruptcy Worksheet

Instructions To Complete Forms

Please answer all of these questions carefully and **bring the completed Worksheet to your follow up appointment**. Our office directs its attention to clients who accurately, completely, and expeditiously provide information to our office. The information you give us will be used to compile the schedules the Court requires to have your bankruptcy case approved. Your answers will determine what will be on your bankruptcy petition. Any errors, omissions, or misrepresentations may seriously affect the discharge of your debts (meaning that you may need to pay them despite filing your bankruptcy). Discuss this with your attorney or the paralegal handling the case.

Where space permits, answer the questions on this questionnaire. However, do not let the available space determine the extent of your response. **If additional space is necessary, use a separate sheet of paper, and identify your answer by using the same number and letter as the question you are answering.** We prefer that you provide us with more information rather than less, because that allows us to better understand your financial situation and represent you more effectively. Providing information on these forms does not mean the information goes into the bankruptcy case; it means we have a chance to review it and have a better awareness of your situation. **Give us more, rather than less, on these forms.**

Questions that request particular dates can usually be answered with the month and year only. Questions that request an address must include the ZIP code, and the complete street or post office box address.

Many parts of the worksheet ask you to place a value on property that you own. Please use the following guideline to determine those values:

Market Value is what the item would sell for, as is, if it were sold in an arms length sale between a willing buyer and seller, neither under a compulsion to buy or sell, in the relevant market, and in a normal marketing time frame. For personal property, this means garage or auction sale prices. For real estate, this means priced so it is sold in 6 months given prevailing market conditions.

The instructions in this questionnaire should answer most of your questions. In addition, we have tried to eliminate "legalese" (or lawyer talk) by using clear and simple language. If you find any question unclear, please call, as accuracy at this stage is of utmost importance.

Remember, each of these questions *must* be answered fully and accurately. If you cannot remember, find out, guess with reasonable accuracy, or answer "Unknown". If the question does not apply, write "N/A". The effort you expend now will help determine how quickly your bankruptcy can be filed and how complete your discharge will be.

Client : ____ File No. : _____________

Documents Needed

You will need to collect and bring the following documents to our office when you deliver your completed worksheet to us. It is very important that you provide all documents that are responsive to these requests. **Each box must be *CHECKED* (if documents are attached), have an *N/A* next to it (if document request is not applicable), or *LEFT BLANK* (if document request is applicable, but you have not attached the document).** Use this page as a checklist for gathering documents.

GENERAL INFORMATION:	**RECEIVED / SCANNED**
☐ Copies of your driver's license or passport & Social Security card	________/________
☐ Credit Counseling Certificate (Need by the time we file your case)	________/________
☐ Trustee questionnaire completed & signed	________/________

SCHEDULE A: **REAL ESTATE INFORMATION:** **RECEIVED / SCANNED**

For each parcel that you have had any interest (ownership, remainder, life estate) at any time during the last 4 years (including those which you sold, transferred, refinanced, surrendered, or was foreclosed), please provide:

Location (street address) of Property: ______________________________________

____

☐ Copy of recorded: a) first page of Mortgage(s) or Deed(s) of Trust; b) pages with signatures; and c) the complete legal description	________/________
☐ Copy of Contract(s) for Deed or recorded Notice of Purchaser's Interest	________/________
☐ Recorded Homestead Declaration	________/________
☐ Promissory Note	________/________
☐ Copies of any judgments as liens on real estate	________/________
☐ Most recent mortgage loan statements, Home Equity Loans/Lines of Credit (HELOC) statements	________/________
☐ Home refinance documents and your general description of the use or disposition of refinance proceeds; include HUD settlement statement	________/________
☐ Property tax assessment notice and / or current market analysis (CMA) or Broker Price Opinion (BPO)	________/________
☐ Copies of survey (if applicable)	________/________

- ☐ Copy of Trustee sale notice ______/______
- ☐ Copy of listing agreement (if property was listed within the last year) ______/______

SCHEDULE B: PERSONAL PROPERTY INFORMATION: RECEIVED / SCANNED

- ☐ **BANK ACCOUNTS:** Copies of the most recent bank, credit union, or other financial institution checking, savings, money market, mutual fund, brokerage and other depository and investment account statements ______/______
- ☐ **INSURANCE POLICIES:** Declarations page, certificate of coverage and annual statements for all policies ______/______
- ☐ **HOMEOWNER / VEHICLE INSURANCE:** Copy of the declarations page for each policy (or copy of annual statement provided by the insurance company), proving that liability and /or general casualty insurance exists for the debtor's assets, and setting forth the declared values of assets and any loan amounts ______/______
- ☐ **RETIREMENT ACCOUNTS:** Most recent monthly or quarterly statements (401k, IRA, PERS, Pensions, etc.) and a Summary Plan Description for each ______/______
- ☐ **BUSINESS INFORMATION:** If you were self employed, had a sole proprietorship or operated a business of any kind (Inc., LLC, LLP, etc.) within the past 6 years, please provide the following for **each entity**:
  - ☐ List of all business assets ______/______
  - ☐ Copy of most recent balance sheet ______/______
  - ☐ Copy of year-to-date profit and loss statement ______/______
  - ☐ Copies of all loan applications provided to anyone within the prior two years ______/______
  - ☐ Copies of all loan documents (including most recent month's statements) ______/______
  - ☐ Copies of last two year's State and Federal income tax returns ______/______
  - ☐ Copy of most recent accounts receivable (including name, address, and amount of each receivable) with a brief collectability assessment for each ______/______
- ☐ **STOCKS, BONDS, OR OTHER MONEY INSTRUMENTS:** Copies of all stocks, bonds, or other instruments which represent or can be converted to money ______/______

Client : ______________________________ File No. : ____________

☐ **LAWSUITS, CLAIMS NOT YET FILED (WORKER COMPENSATION, CAR ACCIDENT AND PERSON INJURY CLAIMS), CLASS ACTION LAWSUITS:** Copies of all lawsuit papers where you are the plaintiff, insurance claims, any document related to claims you have against others and copies of any letters from lawyers you have hired to pursue such claims ________/________

☐ **VEHICLES, MOTORCYCLES, TRAILERS, BOATS, SNOWMOBILES, ATVS, AND OTHER TITLED MOTORIZED STUFF:**

- ☐ Certificate of Title ________/________
- ☐ Appraisal (blue book or other valuation) ________/________
- ☐ Most recent month's loan statement ________/________

☐ **MOBILE HOMES:**

- ☐ Certificate of Title ________/________
- ☐ Underlying Promissory Note and Security Agreement ________/________
- ☐ Recorded Homestead Declaration ________/________
- ☐ Most recent month's loan statement ________/________

☐ **DOCUMENTS FOR PERSONAL PROPERTY:** Provide the following for each item of personal property pledged as collateral to secure a debt, including those assets which the debtor transferred or surrendered with in four years

- ☐ Underlying Promissory Note ________/________
- ☐ Security Agreement or Retail Installment Contract ________/________
- ☐ Recorded proof of perfection (e.g. UCC-1) ________/________
- ☐ Most recent month's loan statement ________/________
- ☐ Proof of fair market value ________/________
- ☐ Appraisal (if any) ________/________

SCHEDULE D, E & F: CREDITOR INFORMATION: RECEIVED / SCANNED

☐ The most recent bill, credit card statement, medical bill, collection account, etc., including complete account numbers, amounts owed, brief description of purpose of debt and approx. date incurred. Include names & addresses of all collection firms, law firms and any prior owners of the debt.

Client : ____ File No. : ____________

<u>SCHEDULE G</u>: **<u>LEASES & CONTRACTS</u>:** **<u>RECEIVED / SCANNED</u>**

☐ All leases for real estate, vehicles, storage units, equipment or anything else ________/________

☐ If security deposits exist for any leases, please bring documents relating to the deposit ________/________

<u>SCHEDULE I & J</u>: **<u>INCOME AND EXPENSES</u>:** **<u>RECEIVED / SCANNED</u>**

☐ **<u>W-2 EMPLOYEES</u>:** Copies of all payment advices, wage or pay stubs, or other evidence of payment received by you from any employer or from any other source within the last 6 months ________/________

☐ **<u>SELF EMPLOYED</u>:** Copy of a year to date profit and loss statement ________/________

☐ **<u>OTHER INCOME</u>:** Copies of any documents relating to all other types of income: investment, dividends, rental, AFDC, public assistance, food stamps, unemployment, disability, social security, pension / annuities, regular gifts or assistance from friends or relatives ________/________

<u>STATEMENT OF FINANCIAL AFFAIRS</u> **<u>RECEIVED / SCANNED</u>**

☐ **<u>TAX RETURNS</u>:** Past 2 years returns with complete schedules for both personal and for **<u>each entity</u>** that you have/had any ownership interest in, which includes an LLC, corporation, d/b/a or other business entity ________/________

☐ **<u>SUITS, ADMINISTRATIVE PROCEEDINGS, EXECUTIONS, GARNISHMENTS, AND ATTACHMENTS:</u>** Lawsuit papers including complaints, judgments, wage garnishments or bank levies for all lawsuits regardless of whether you are getting sued or you are suing someone else. ________/________

☐ **<u>DIVORCE:</u>** If you were divorced within the last 2 years, copies of the divorce decree and any marital settlement agreement. ________/________

☐ **<u>REPOSSESSIONS, FORECLOSURES, AND RETURNS:</u>** Copy of all documents within the last 4 years that relate. ________/________

☐ **<u>TRANSFERS:</u>** Copy of all documents relating to property transferred (not in the ordinary course) within the last 4 years. ________/________

☐ **<u>TRANSFERS</u>:** Copy of all documents relating to property transferred within the last 10 years to a self settled trust or similar device, which you are a beneficiary. ________/________

☐ **<u>CLOSED BANK ACCOUNTS</u>:** Copy of final statement/document. ________/________

☐ **<u>LOAN APPLICATIONS</u>:** Copy of all loan applications submitted to any bank, credit union, other financial institution, wholesale or retail merchant, or any other entity within the last 2 years [not including credit cards]. ________/________

Client : ______________________________ File No. : ____________

Real Property

Real Property: When valuing real property (land and any structures built on it), base the value on what similar properties in your area are selling for. See the instruction on Market Value, page 1, of this packet.

If you had an appraisal within the last 2 years, please use that value and provide a copy. If the property was listed for sale in the past 2 years, please advise us of the listing price and marketing history.

YOUR HOMESTEAD / PRIMARY RESIDENCE

Street Address	Amount Owed	$
	Monthly Payment	$
	Type of Loan (VA, FHA, Conventional)	
	Market Value	$
	Lienholder Name	
	Lienholder Telephone	
Any other relevant information		
Who owns it? Husband Wife Joint		

OTHER REAL PROPERTY

Street Address	Amount Owed	$
	Monthly Payment	$
	Type of Loan (VA, FHA, Conventional)	
	Market Value	$
	Lienholder Name	
	Lienholder Telephone	
Any other relevant information		
Who owns it? Husband Wife Joint		

Client : ____ File No. : _______________

Personal Property

Personal Property & Household Goods: When filling out this part of the worksheet, use the Market Valuation standard on page 1 of this packet. For most household goods this will be "garage sale price." Remember, market value is not what the item is worth to you (i.e. emotional or sentimental value), but what the item is worth in this economic market.

Category	Value	Total Liens
1. Cash on Hand	$	$
Who owns it? Husband Wife Joint		
2. Checking Accounts, CDs, etc.	$	$
Description by bank name, type of account and account #: Example: First Interstate checking, # xxx 1234 $250 Who owns it? Husband Wife Joint		
3. Security Deposits	$	$
Description: landlord, utility company, secured credit cards Who owns it? Husband Wife Joint		
4. Household Goods and Furnishings	$	$

Items worth more than $50/item: List each item (or collection of items, like CD'S) worth more than $50 individually and assign a value to that single item.

Items worth less than $50/item: Just disclose the existence of the items, describe them generally or by category and state they are worth less than $50/item or category.

Example: TV, $75; Washer & dryer, $100. Kitchen pots & pans, utensils; living room knick-knacks, all worth less than $50/item. Collection example: 100 CDs @ $2/CD = $200.00. For multiple types of house hold items example: Couch #1, $50; Couch # 2 $75; Couch # 3 $100

You may wish to do this room by room to make sure all HH goods are disclosed. Be sure to identify all items stored in a storage unit or house hold items that belong to you, held by others.

Qty	Fair Market Value	Description	Qty	Fair Market Value	Description
		Couch			Dressers
		Love Seat			Televisions
		Lamps			Stereos
		Tables			Other

Client : ____ File No. : _______________

Qty	Fair Market Value	Description	Qty	Fair Market Value	Description
		Chairs			CD/VCR/DVD or Record Collections
		Beds			Barbeques
		Desks			Other
		End Tables			Entertainment Center
		Refrigerator			Freezer
		Washer/Dryer			Dishwasher
		Microwave			Satellite Dish
		Trash Compacter			Range/Oven

5. Books, Pictures, Collections, and other art objects	$	$

Same instructions as item #4 above.

Qty	Fair Market Value	Description	Qty	Fair Market Value	Description
		Books			Sculptures
		Pictures			Knicknacks
		Desks			Fish Tank(s)
		Coin/Stamp Collections			Paintings or Other Art Work
		Antiques			Video Equipment
		Cameras			Computer Equipment
		Typewriters			Swimming Pool (Describe)
		Binoculars			
		Other (Describe)			

Who owns it? Husband Wife Joint

Client : ______________________________ File No. : ______________

6. Clothing	$	$

Same instructions as item #4 above.

Qty	Fair Market Value	Description	Qty	Fair Market Value	Description
		Men's Clothes			Children's Clothes
		Women's Clothes			Other (Describe)

Who owns it? Husband Wife Joint

7. Furs and Jewelry	$	$

Same instructions as item #4 above.

Qty	Fair Market Value	Description Itemize item if over $50.00	Qty	Fair Market Value	Description Itemize item if over $50.00
		Jewelry (Men's)			Furs
		Jewelry (Women's)			Other (Describe)

Who owns it? Husband Wife Joint

8. Firearms, Sports, Photographic, and/or Hobby Equipment	$	$

Same instructions as item #4 above.

Qty	Fair Market Value	Description Itemize item if over $50.00	Qty	Fair Market Value	Description Itemize item if over $50.00
		Gun (Describe make, model & Caliber)			Sporting Equipment (Describe Golf, Hiking, Fishing)
		Gun (Describe make, model & Caliber)			Other (Describe)
		Skis (Describe)			

Who owns it? Husband Wife Joint

Client : ____ File No. : ______________

Category	Value	Total Liens
9. Life Insurance Policies	$	$
Description of all policies (term and whole life) by: a) name of carrier; b) policy #; c) identify insured & beneficiary; d) disclose face amount; e) total cash value; f) outstanding loans; and g) net cash value. If cash value, please provide both a declarations page and the most recent annual statement for each policy. Who owns it? Husband Wife Joint		
10. Annuities	$	$
Description by: a) name of company; b) policy or contract #; c) identify insured & beneficiary; d) disclose amount; e) total cash invested; f) outstanding loans and other relevant details. Who owns it? Husband Wife Joint		
11. Educational IRAs	$	$
Description by: a) name of plan administrator; b) policy or contract #; c) identify owner & beneficiary; d) disclose total amount; e) outstanding loans and net cash value. (Please obtain & provide a "Summary Plan Description" for each). Who owns it? Husband Wife Joint		
12. IRAs, 401(k) Plans, and other Pensions	$	$
Description by: a) name of plan administrator; b) policy or contract #; c) identify owner & beneficiary; d) disclose total amount; e) outstanding loans and net cash value. (Please obtain & provide a "Summary Plan Description" for each). Who owns it? Husband Wife Joint		
13. Stocks or interests in: a) corporations; b) LLCs; c) other artificial entities of any sort; and d) unincorporated businesses (d/b/a or self employment, IRS Schedule C businesses)	$	$
Please provide: 1) Exact name of entity 2) Type / nature of business conducted (dominant business segments) 3) Number of shares or other equity interests owned (what % of the business entity do you own?) 4) Value of shares / equity interest that you own 5) Value of entity & basis / source for valuation (and the date of the valuation) 6) Beginning & ending dates of business activity Who owns it? Husband Wife Joint		

Client : ____ File No. : ____________

Category		Value	Total Liens
14. Interests in Partnerships or Joint Ventures		$	$
Please provide: 1) Exact name of entity 2) Type / nature of business conducted (dominant business segments) 3) Number of shares or other equity interests owned (what % of the business entity do you own?) 4) Value of shares / equity interest that you own 5) Value of entity & basis / source for valuation (and the date of the valuation) 6) Beginning & ending dates of business activity Who owns it? Husband Wife Joint			
15. Government/Corporate Bonds - Negotiable Instruments		$	$
Provide name of entity, type and face value of bonds. Who owns it? Husband Wife Joint			
16. Accounts Receivable (money owed to you)		$	$
Debts owed to your business created in the ordinary course of business operations. Does not apply to consumers. Who owns it? Husband Wife Joint			
17. Alimony, Maintenance, Support, Property Settlements (money owed to you)		$	$
Please describe and provide a copy of the judgment or other court order that provides you can receive this. Who owns it? Husband Wife Joint			
18A. Liquidated debts (other monies owed to you)		$	$
Money you have loaned to others even if no documents exist. Who owns it? Husband Wife Joint			
18B. Tax Refund		$	$
Owed to you and not yet received. Provide years, type of tax and copy of return. Who owns it? Husband Wife Joint			

Client : ______________________________ File No. : ______________

Category	Value	Total Liens
19. Equitable or Future Interests, Life Estates, or Rights or Powers	$	$
Equitable or future interests are interests in real estate or trusts that take effect in the future. Life estates are created in recorded deeds and are the right to occupy a parcel of land for the remainder of the life of someone. Who owns it? Husband Wife Joint		
20. Interest in Decedent's Estate or Other Death Benefit Plans	$	$
Description: Who owns it? Husband Wife Joint		
21. Other Contingent and/or Unliquidated Claims	$	$
Any claim(s) you may have to sue anyone for anything, whether you have sued them or not. Claims for insurance losses, car accidents, personal injury, social security, unemployment, workers compensation, and related government benefits. If the conduct/event/occurrence/transaction that gave rise to a claim prior to you reading this, you need to disclose the claim regardless of your intent to pursue it. If you have engaged an attorney to investigate or pursue a claim, please disclose it, contact the attorney and give him/her consent to discuss the claim with us. Ask him/her to send us a letter summarizing the claim (status, expected recovery, and anticipated date of resolution). Have you received a notice that you are a member of a class or part of a class action lawsuit? If so, that information goes here. Who owns it? Husband Wife Joint		
22. Patents, Copyrights, or Other Intellectual Property	$	$
Description: Who owns it? Husband Wife Joint		
23. Licenses, Franchises, or Other Intangibles	$	$
All licenses other than driver's licenses. Disclose pilot, professional, occupational, weapons permits, radio operator, etc. Who owns it? Husband Wife Joint		
24. Customer Lists	$	$
Disclose all customer lists. Who owns it? Husband Wife Joint		

Client : ____ File No. : ______________

25. Automobiles, Motorcycles, Trailers, Mobile Homes, other Vehicles (year, make & model)

Qty	Fair Market Value	Description Itemize item
		Automobiles (make, model, year, condition & mileage)
		Automobiles (make, model, year, condition & mileage)
		Automobiles (make, model, year, condition & mileage)
		Motorcycle (make, model, year)
		ATVs, Snowmobiles, Trailers, or Other (make, model, year)

Who owns it/them? Husband Wife Joint

26. Boats, Motors, and Accessories

Qty	Fair Market Value	Description Itemize item
		Boat (make, model, year)
		Boat Motors (make, model, year)
		Boat Trailers (make, model, year)
		Other (make, model, year)

Who owns it/them? Husband Wife Joint

27. Aircraft and Accessories $ $

Description:

Who owns it? Husband Wife Joint

Client : ____ File No. : ______________

Category	Value	Total Liens
28. Office Equipment, Furniture, and Supplies	$	$
Same instructions as item #4 above. Who owns it? Husband Wife Joint		
29. Tools of Trade, Machinery, Fixtures, and Equipment/Supplies Used in Business	$	$
Same instructions as item #4 above. Who owns it? Husband Wife Joint		
30. Business Inventory	$	$
Same instructions as item #4 above. Who owns it? Husband Wife Joint		
31. Animals (pets, farm animals, etc.)	$	$
Description: Who owns it? Husband Wife Joint		
32. Crops	$	$
Description: Who owns it? Husband Wife Joint		
33. Farming Equipment or Implements	$	$
Description: Who owns it? Husband Wife Joint		
34. Farming Supplies, Chemicals, and Feed	$	$
Description: Who owns it? Husband Wife Joint		
35. Other Personal Property (not already listed)	$	$
Things like: a) health club memberships; b) timeshares; c) season tickets for sports or theatre events; d) frequent flier miles; e) your membership in any class action lawsuits; f) wood in woodshed etc. These types of property usually lack economic value due to transfer restrictions, but they are interests in property and must be disclosed and valued.		
Who owns it? Husband Wife Joint		

Client : ______________________________ File No. : ____________

Creditors

Please list SECURED and PRIORITY creditors first, followed by UNSECURED creditors.
If additional space is needed, please provide the same information on a separate page.

What is a *secured debt*? A secured debt is a debt which has collateral or security in the form of property. Houses, land, cars, large appliances and furniture are all examples of secured debts if they have not already been paid off. Creditors who have obtained judgments have a lien on your real estate.

What is a *priority debt*? A priority debt is a tax or administrative debt. Monies owed to the Internal Revenue Service and other taxing authorities are the best examples of priority debt. However, there are many circumstances where the IRS could also be a secured (if they have a lien on property) or even an unsecured debt (if the debt is too old).

What is an *unsecured debt*? Unsecured creditors do not have any collateral to secure payment of your debt. Examples include most credit cards, medical bills, and signature loans.

Check here if you dispute this claim; Amount disputed: $__________

Creditor Name and Address	**Whose Debt?**		
	Husband	**Date Incurred**	
	Wife	**Amount Owed**	
	Joint	**Value of Collateral**	
	Community	**Contract Interest**	%
		Contract Pmt.	
Account No.:			
Description of Collateral (if any) / Comments / Name & Address of all Collection firms & Law firms			
Nature of lien (if secured); Nature of debt (if unsecured); Lawsuit pending ?			

Check here if you dispute this claim; Amount disputed: $__________

Creditor Name and Address	**Whose Debt?**		
	Husband	**Date Incurred**	
	Wife	**Amount Owed**	
	Joint	**Value of Collateral**	
	Community	**Contract Interest**	%
		Contract Pmt.	
Account No.:			
Description of Collateral (if any) / Comments / Name & address of all collection firms & law firms			
Nature of lien (if secured); Nature of debt (if unsecured); Lawsuit pending ?			

Client : ______________________________ File No. : ______________

Leases and Contracts

(Attach additional sheets if necessary)

YES / NO	QUESTION	
	Please state "Yes" or "No" in the box at left indicating whether or not you have unexpired leases or executory contracts of any kind? Leases include apartment leases, house leases, car leases, etc. Executory contracts include contracts for services, contracts for deed, contracts for sale, cell phone contracts, etc. If "Yes", please list **all** parties to the contract or lease, describe the nature of the interest, and **attach copies of the lease or contract to this package**. Please indicate whether you wish to assume (keep) or reject (end) the contract or lease by circling **"Y"** or **"N"** when asked.	
DESCRIPTION (Type of contract/lease)	TERMS & CONDITIONS OF LEASE OR CONTRACT (MONTHLY PAYMENT AMOUNT, # OF PAYMENTS LEFT, PAYMENT DATE EACH MONTH, ETC.)	NAME AND ADDRESS OF PARTY ON CONTRACT/LEASE
ASSUME? Y or N		
DESCRIPTION (Type of contract/lease)	TERMS & CONDITIONS OF LEASE OR CONTRACT (MONTHLY PAYMENT AMOUNT, # OF PAYMENTS LEFT, PAYMENT DATE EACH MONTH, ETC.)	NAME AND ADDRESS OF PARTY ON CONTRACT/LEASE
ASSUME? Y or N		
DESCRIPTION (Type of contract/lease)	TERMS & CONDITIONS OF LEASE OR CONTRACT (MONTHLY PAYMENT AMOUNT, # OF PAYMENTS LEFT, PAYMENT DATE EACH MONTH, ETC.)	NAME AND ADDRESS OF PARTY ON CONTRACT/LEASE
ASSUME? Y or N		
DESCRIPTION (Type of contract/lease)	TERMS & CONDITIONS OF LEASE OR CONTRACT (MONTHLY PAYMENT AMOUNT, # OF PAYMENTS LEFT, PAYMENT DATE EACH MONTH, ETC.)	NAME AND ADDRESS OF PARTY ON CONTRACT/LEASE
ASSUME? Y or N		
DESCRIPTION (Type of contract/lease)	TERMS & CONDITIONS OF LEASE OR CONTRACT (MONTHLY PAYMENT AMOUNT, # OF PAYMENTS LEFT, PAYMENT DATE EACH MONTH, ETC.)	NAME AND ADDRESS OF PARTY ON CONTRACT/LEASE
ASSUME? Y or N		

Client : ____________________ File No. : __________

Current Monthly Income

Please provide us the information described in the Documents Needed section above and the information for non-employment income below, and we will calculate your average or projected monthly income using bankruptcy court accepted methods. We will show you the calculations so you know how it was calculated.

Income is carefully scrutinized by the Office of the United States Trustee. Some cases are selected for either a US Department of Justice income audit and / or an informal inquiry by the United States Trustee. It is imperative that we have accurate information with respect to income and calculate the monthly amounts properly.

Income from all other sources:

Property Rental	$	$
Interest/Dividends	$	$
Alimony/Support	$	$
Govt. Asst.	$	$
Retirement/ Pension # 1	$	$
Retirement/ Pension # 2	$	$
Social Security	$	$
Other sources paid at time of filing	$	$

Please describe any changes in the above amounts expected to occur in the next year.

Client : ____ File No. : ___________

Monthly Expenses

Please provide us the information described below after you either: a) estimate your projected expenses; or b) calculate your average actual monthly expenses. We recommend that you calculate the expenses as follows:

1) review your financial records for at least 6-12 months;

2) categorize your expenses into the categories below;

3) add them up;

4) divide the total amounts by the number of months of data you used.

Bankruptcy cases are sometimes selected at random for an audit; therefore, we request that you retain a copy of all calculations and other analysis that you prepare. Please remember, estimating your expenses will be difficult to justify if you are asked by the Trustee, US Trustee, or the Court to explain your calculations.

For variable expenses, determine how much you typically spend in a year and divide by that number by twelve. Medical expenses should not include insurance premiums. Do not include any expenses that are deducted from your pay. If home insurance and property taxes are included in your mortgage payment, do not list them separately.

Category	Monthly Avg. out-of-pocket	Misc. Notes
HOUSING		Note: Some of this data may also be included in your Real Estate form.
Rent	$_________	
First mortgage	$_________	
Second mortgage	$_________	
Third mortgage	$_________	
Association dues/CAM fees	$_________	
Alarm service/security	$_________	
Home maintenance & repairs (*lawn care, pool maintenance, gardening, decorations, termite contract, etc.*)	$_________	

TAXES		
IRS (If monthly payment amount is known, list that. If not known, estimate the total debt and divide by 60.)	$________	
Local property taxes (If you pay directly, add the total city and county annual taxes together, and divide that total by 12.)	$________	(Only if you pay the taxes directly; if they are included in your mortgage payment, skip this line.)
Income taxes from other state	$________	State: ____________________________
Other	$________	Explain:

UTILITIES & SERVICES		
	$________	
Gas	$________	
Electric	$________	
Water	$________	
Garbage pickup	$________	
Home telephone (land line)	$________	
Cell phones/pager/other wireless	$________	
Cable or satellite	$________	
Internet service	$________	
Phone & Internet combined	$________	
Cable, phone & Internet combined	$________	
Other (explain)	$________	

Client : ____ File No. : ____________

FOOD		
Groceries	$________	(Groceries may include non-food items)
Dining out	$________	
Meals at work and/or school	$________	
Snacks, misc.	$________	

CLOTHING		
Clothes, shoes, socks, underwear, hats, coats, gloves, work, personal, diapers, special needs, etc., for the whole family.	$________	(Estimate all clothing costs for one entire year, and divide that by 12 to get a monthly average.)

MEDICAL, DENTAL, OPTICAL (Only list your co-pay and out-of-pocket expenses. Do not count anything that is covered by insurance, or that is paid by someone else.)		
Prescriptions:	$________	Explain:
Over-the-counter meds (Only if not included in the grocery category, above.)	$________	Explain:
Doctors (even if you don't have a regular doctor visit, if someone in your family tends to see the doctor occasionally, state a fair monthly average.)	$________	Explain:
Lab work	$________	
Dental (including anticipated expenses)	$________	
Optical (glasses, contacts, related items)	$________	

Client : ____ File No. : ______________

TRANSPORTATION (*Not including car payments)		(*Everything else related to car & lease payments is in the Vehicle form)
Gas (all cars in the household)	$_________	
Maintenance	$_________	
Tires, misc. repairs	$_________	
Registration/taxes	$_________	
Cab, bus, private rides	$_________	
Parking	$_________	

ENTERTAINMENT & RECREATION		(Yes, it's okay to spend a little money on these things!)
Books, newspapers, magazines	$_________	
Movies (buy, rent or attend)	$_________	
Sporting events	$_________	
Hobbies	$_________	
Club dues (including gym or spa)	$_________	
Cigarettes/tobacco	$_________	
Alcohol	$_________	
Lottery/casinos/bingo, etc.	$_________	
Vacations/travel (if not already included in other categories, above)	$_________	
Other	$_________	Explain:

MISCELLANEOUS (Things not already included above)		
Work requirements (clothes, tools, union or professional dues that are not already reflected in your paycheck)	$_________	Explain:
Laundry/dry cleaning	$_________	
Hair cuts, hair care, nails, etc.	$_________	

Bank service charges, postage, tax preparation	$_________	
Pet care, pet food, vet, etc.	$_________	
Savings, reserve	$_________	
Christmas, birthdays, other presents	$_________	
Other	$_________	Explain:
Other	$_________	Explain:

CHURCH & CHARITY (State how much you have really been giving lately. Do not include anything that is coming out of your paycheck.)		
Church (If more than $200/month, bring canceled checks and/or a recent statement from your church.)	$_________	
Recognized charity (United Way; St. Jude; Firemen/Police, etc.)	$_________	Explain:
Neighborhood group or local charity	$_________	Explain:

COURT-ORDERED (Or voluntary)		(If voluntary, please say so in this column. Also, if this support payment is already coming out of your paycheck, please note that here.)
Child support: ongoing every: month; week; 2 weeks; semi-monthly	$_________	(If more than one, add them together for now, and make a note here.)
Child support: arrearage every: month; week; 2 weeks; semi-monthly	$_________	
Alimony	$_________	
Criminal restitution	$_________	
Other	$_________	
CHILD CARE/SENIOR CARE		

Client : ______________________________ File No. : ______________

Day care/sitters (*Including informal arrangements*)	$________	Explain:
Diapers, formula, related supplies (*if not included in groceries, above.*)	$________	
Before care/after care	$________	
Summer camps, scouting, etc.	$________	
Special needs	$________	Explain:

SCHOOL/EDUCATION		
Tuition for yourself (*College, continuing education, etc.*)	$________	Explain:
Expenses for yourself (*Books, supplies, equipment, parking, etc.*)	$________	
Tuition for children under 18	$________	
Expenses for children under 18 (*Books, supplies, equipment, etc.*)	$________	
Tuition for children over 18	$________	Explain:
Expenses for children over 18 (*Books, supplies, equipment, etc.*)	$________	Explain:
Children's sports & extracurricular activities	$________	Explain:
Other	$________	Explain:

INSURANCE		
Automobile (list here, even if it was discussed in the Vehicle form)	$________	If your policy has lapsed, but you still have the car(s), list the most recent rate.
Homeowner's insurance	$________	(Only if you pay the premium directly; if it's included in your mortgage payment, skip this line.)
Renter's insurance	$________	

Life	$_________	(Only if you pay the premium directly; if it comes out of your paycheck, skip this line.)
Health/medical	$_________	(Only if you pay the premium directly; if it comes out of your paycheck, skip this line.)
Business-related	$_________	(Only if you pay the premium directly; if it comes out of your paycheck, skip this line.)
Burial/other insurance	$_________	

INSTALLMENTS, LEASES AND RENT-TO-OWN (please state exact items)	(If not monthly, please note the schedule here)	
Vehicle # 1	$_________	Creditor:
Vehicle # 2	$_________	Creditor:
Vehicle # 3	$_________	Creditor:
Vehicle # 4	$_________	Creditor:
Furniture	$_________	Creditor:
Appliance(s)	$_________	Creditor:
Electronics	$_________	Creditor:
Student Loan	$_________	Creditor:
Other	$_________	Creditor:

Please describe any changes in the above monthly expenses amounts expected to occur in the next year.

Client : ____ File No. : ____________

Statement of Financial Affairs

ALL QUESTIONS ARE TO BE ANSWERED COMPLETELY AND HONESTLY. Intentionally omitting or giving false information may be a punishable felony. Further, filing false documents is grounds for the Court to deny a discharge, meaning that your creditors can still pursue you.

EACH QUESTION MUST BE ANSWERED. IF THE ANSWER TO ANY QUESTION IS "NONE" OR THE QUESTION IS NOT APPLICABLE, WRITE "NONE" OR "NOT APPLICABLE" IN THE ANSWER BOX.

Information about Spouses.

Spouses filing jointly should fill out a single statement on which the information for both spouses is combined. A married client must furnish information for both spouses whether or not the spouse also files, unless the spouses are separated.

Business Clients.

An individual client engaged in business as a sole proprietor, partner, family farmer or self-employed professional, should provide the information requested on this statement concerning all activities as well as the individual's personal affairs.

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

If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

You. **"You"** means you, the client. If both husband and wife file, "**you**" includes both of you. If only one spouse files, "**you**" may include the non-filing spouse – please read the instructions for the question. If you own an interest in a corporation, "**you**" does not include the corporation.

In business. A client is "**in business**" for the purpose of this form if the client is a corporation or partnership. An individual client is "in business" for the purpose of this form if the client is or has been, **within the 6 years** immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or person in control of a corporation; a partner, other than a limited partner, of a partnership; **a sole proprietor, or self-employed**.

Client : ____ File No. : _______________

1. Income from employment or operation of business: You are required to disclose the **gross** amount of income received from employment, trade or profession, or from operation of your business from the beginning of this calendar year to the date this case was filed and for the **2 years** immediately preceding this calendar year. We will get this information directly from the documents you provide. If you receive income from employment or a business operation that is not on the documents you provide, please disclose it here.

YEAR	INCOME AMOUNT		SOURCE (if more than one)
2010 YTD	Debtor	$ __________	
2010 YTD	Spouse	$ __________	
2009	Debtor	$ __________	
2009	Spouse	$ __________	
2008	Debtor	$ __________	
2008	Spouse	$ __________	

2. Income other than from employment or operation of business for past 2 years.

State the amount of income received by the client ***other than*** from employment, trade, profession, or operation of the client's business during the past **2 years** (pensions, social security, child support, workers compensation, unemployment, and gifts from relatives). Give particulars. If husband and wife file jointly, state income for each spouse separately.

YEAR	INCOME AMOUNT		SOURCE (if more than one)
2010 YTD	Debtor	$ __________	
2010 YTD	Spouse	$ __________	
2009	Debtor	$ __________	
2009	Spouse	$ __________	
2008	Debtor	$ __________	
2008	Spouse	$ __________	

Client : ____ File No. : _____________

3. Payments to creditors during the past 90 days

a. More than $600 (total) during the past 90 days. List all payments to any creditors totaling more than $600 made within the past 90 days.

CREDITOR	DATES OF PAYMENTS	PAYMENT AMOUNT OR TOTAL OF ALL PAYMENTS	AMOUNT STILL OWING

b. Payments to insiders during the past 1 year. List all payments made during the past **1 year** to or for the benefit of creditors who are or were insiders. (An "**Insider**" includes, but is not limited to: a) relatives of the client; b) general partners of the client and their relatives; c) corporations of which the client is an officer, director, or person in control; d) officers, directors, and any person in control of a corporate client and their relatives; and\or e) any managing agent of the client.)

NAME OF PAYEE AND RELATIONSHIP TO YOU	DATES OF PAYMENTS	PAYMENT AMOUNT OR TOTAL OF ALL PAYMENTS	AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

a. In which you were a party during the past 2 years. List all suits (including divorce cases and any class action in which you may be a class member), which you are or were a party (you were being sued by someone or you were suing someone else) during the past **2 years**. (***Married clients must include information concerning either or both spouses whether or not a joint petition is filed.***)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION

Client : ______________________________ File No. : ____________

b. **Property seized during the past 2 years.** Describe all property that has been attached, garnished or seized under any legal or equitable process for the benefit of another within **2 years** immediately preceding the filing of this case. (***Married clients must include information concerning property of either or both spouses whether or not a joint petition is filed.***)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED (CREDITOR)	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns during the past 2 years

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, during the past **2 years**. (***Married clients must include information concerning property of either or both spouses whether or not a joint petition is filed.***)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made during the past **120 days**. (***Married clients must include any assignment by either or both spouses whether or not a joint petition is filed.***)

b. List all property that has been in the hands of a custodian, receiver, or court-appointed official during the past **1 year**. (***Married clients must include information concerning property of either or both spouses whether or not a joint petition is filed.***)

7. Gifts during the past 2 years (stuff you gave away, not stuff you received)

List all gifts or charitable contributions you made to others within the last **2 years**, except ordinary and usual gifts to family members, totaling more than $200 in value per individual family member and charitable contributions of more than $100 per recipient. (***Married clients must include gifts or contributions by either or both spouses whether or not a joint petition is filed.***)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO CLIENT, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT

8. Fire, Theft, Gambling or Casualty losses within past 2 years

List all losses from fire, theft, other casualty or gambling during the past **2 years**. (***Married must include losses by either or both spouses whether or not a joint petition is filed.***)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE. GIVE PARTICULARS	DATE OF LOSS

9. Payments related to debt counseling or bankruptcy during the past 2 years

List all payments made or property transferred by or on behalf of the client to any persons, <u>including attorneys</u>, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy during the past **2 years**.

NAME AND ADDRESS OF PAYEE	NAME OF PAYOR IF OTHER THAN CLIENT	DATE OF PAYMENT	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Credit Counseling			
Any other law firm in past year			

Client : ____ File No. : ____________

10. Any and All Other transfers during the past 4 years

List all other property <u>of any kind</u>, other than property transferred in the ordinary course of the business or financial affairs of the client, that you transferred either absolutely (sale, gift, throw away, any type of disposition) or as security (pledged it as collateral, refinanced house, took out Home equity loan) during the past **4 years**. **(*Married clients must include transfers by either or both spouses whether or not a joint petition is filed.*)**

NAME AND ADDRESS OF RECIPIENT, RELATIONSHIP TO CLIENT, IF ANY	DATE (month / year)	DESCRIBE: a) PROPERTY TRANSFERRED; b) VALUE RECEIVED (gross & net); c) A GENERAL DESCRIPTION OF THE USE OF THE GROSS PROCEEDS; and d) THE NAME OF THE LIEN HOLDER / CREDITOR

11. Financial Accounts and Instruments (CDs, etc.) closed, sold, or transferred during the past 2 years

List all financial accounts and instruments held in your name or for your benefit which were closed, sold or otherwise transferred during the past **2 years**. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (***Married must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed.***)

NAME AND ADDRESS OF INSTITUTION	AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
Acct. No.:		
Acct. No.:		

12. Safe deposit boxes where you had things in past 2 years List each safe deposit or other box or depository in which you have or had securities, cash, or other valuables during the past **2 years**. (***Married must include boxes or depositories of either or both spouses whether or not a joint petition is filed.***)	
NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY & DATE OF TRANSFER OR SURRENDER, IF ANY	**CONTENTS**
Date Transferred/Surrendered:	
NAMES AND ADDRESSES OF THOSE WITH ACCESS	

13. Setoffs List all setoffs made by any creditor, including a bank, against a debt or against a deposit during the past **90 days**. **(*Married clients must include information concerning either or both spouses whether or not a joint petition is filed.*)**

14. Property held for another person List all property owned by another person that you hold, control or have in your possession, custody and control. This includes: a) household goods that belong to relatives or friends in your residence; b) property in your residence that belongs to minor children; c) vehicles that belong to someone else; and d) anything in your possession, custody or control that you do not own or does not belong to you.	
NAME AND ADDRESS OF OWNER	**DESCRIPTION AND VALUE OF PROPERTY**
	Value:
LOCATION OF PROPERTY:	
NAME AND ADDRESS OF OWNER	**DESCRIPTION AND VALUE OF PROPERTY**
	Value:
LOCATION OF PROPERTY:	

Client : ____ File No. : _____________

15. Prior address during the past 3 years

If you have moved during the past 3 years, list all premises you occupied during that period and vacated prior to filling out this form. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME(S) USED	DATES OF OCCUPANCY
ADDRESS	**NAME(S) USED**	**DATES OF OCCUPANCY**

16. Spouses and Former Spouses.

If the debtor resides or resided in a community property state, commonwealth, or territory (including **Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin**) during the past **8 years**, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME AND ADDRESS OF CURRENT/FORMER SPOUSES

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, release of a hazardous or toxic substance, waste, 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 the substance, waste, or material.

"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, or 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:

b. List the name and address of every site where the debtor provided notice to a governmental unit disclosing a release of Hazardous Material. Indicate: a) the governmental unit where the notice was sent; and b) the date of the notice.

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

18. Nature, location and name of business

a. If you are an **individual**, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the client was an officer, director, partner, or managing executive of a corporation, LLC, partnership, **sole proprietorship, or was a self-employed professional** during the past **6 years** immediately preceding the filing of this case, or in which the client owned **5 percent** or more of the voting or equity securities during the past **6 years**.

If the client is a **partnership or LLC**, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the client was a partner or owned **5 percent** or more of the voting or equity securities, during the past **6 years**.

If the client is a **corporation**, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the client was a partner or owned **5 percent** or more of the voting or equity securities during the past **6 years**.

NAME, ADDRESS, AND TAXPAYER I.D.	NATURE OF BUSINESS	BEGINNING AND ENDING DATES OF OPERATION
Tax I.D. No.:		**From:** **To:**
Tax I.D. No.:		**From:** **To:**

Client : ____ File No. : ______________

Business Section

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 a corporation or partnership and by any **individual client** who is or has been, during the past **6 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.**

(AN INDIVIDUAL OR JOINT CLIENT SHOULD COMPLETE THIS PORTION OF THE STATEMENT **ONLY IF** THE CLIENT IS OR HAS BEEN IN BUSINESS, AS DEFINED ABOVE, DURING THE PAST 6 YEARS.)

19. Books, records and financial statements

a. **Bookkeepers and accountants during the past 2 years.** List all bookkeepers and accountants who, during the past **2 years**, kept or supervised the keeping of your books of account and records.

NAME AND ADDRESS	DATE(S) SERVICES RENDERED

b. Auditors and preparers of financial statements during the past 2 years. List all firms or individuals who, during the past **2 years**, have audited the books of account and records, or prepared a financial statement of the client.

NAME AND ADDRESS	DATE(S) 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 and records are not available, explain and provide details as to why the records are not available..***

NAME AND ADDRESS
Is this person available? Yes No Please explain:

d. **People who received financial statements during the past 2 years.** List all financial institutions, creditors and other parties, including mercantile and trade agencies that were issued a financial statement during the past **2 years**.

NAME AND ADDRESS	DATE ISSUED

20. Inventories

a. Last two inventories. List the dates of the last 2 inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and value basis (market or other) of each inventory

DATE OF 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.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
Date of Inventory:

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