

BANKRUPTCY LAW OFFICES

STEPHEN JOHNSON

13620 Lincoln Way Suite 220

Auburn Ca. 95603

Ph: 530-823-3655

Fax: 530-823-3572

We appreciate you employing this office in representing/preparing your bankruptcy. In order to expedite your filing we will need the following information. Everything asked for is required by the court and to ensure your case transitions seamlessly from filing to hearing to discharge. **Please keep these first 2 sheets for you to reference.**

We will need the following:

- **TWO MOST RECENTLY FILED FEDERAL TAX RETURNS.** We need the ENTIRE RETURN, including all schedules and the W2s. If you have not filed your tax returns and do not plan to file prior to filing this case, provide us with your most recently filed tax returns, regardless of what year it was. This is a requirement of the court to supply these returns to the trustees. If you foresee any problem regarding this requirement, call our office immediately.

- **DOCUMENTED INCOME FOR THE LAST 6 MONTHS.**
 - Pay Stubs for the last 6 months
 - Work in which you are an independent contractor and are a 1099 employee
 - Social Security Income (Please provide award letters).
 - EDD or other unemployment compensation (Please provide award letter).
 - Retirement Pension (Please provide award letter or monthly statements).
 - Ongoing contributions (not gifts) from a family member or friend
 - Income from your corporation or LLC (a paycheck or owner draws)
 - Self Employed, see below

*If you did not work, or had employment where you did not receive a typical pay check with payroll deductions, etc., we will need to have an accounting for the last six months with the dates and income received. This office will prepare a declaration to meet court requirements.

- If you are self-employed, owner of a corporation or LLC please provide specific information on the appropriate pages within the questionnaire regarding income from business.
 - For **self employment** (sole proprietorship) a profit and loss statement will be included in the questionnaire to document the income and expenses from your business.
 - For a **corporation or LLC** provide the amounts that you were paid or withdrew from the corporation over the past six months.

Prior to filing any case you are REQUIRED to take a Credit Counseling Course. This can be done online or if needed by phone. If you are filling jointly, both of you will have to have completed the course. The class will take between 1 and 1 1/2 hours to complete. www.consumerbankruptcycounseling.info is the only **FREE** counseling course this office has found. The cost is usually \$15-\$50 for an individual (single) filing or joint (married) filing. There are many companies that provide this course and can be found online. The important thing is that they are certified by the courts and can provide the required certificate of completion that is needed before a bankruptcy petition can be filed.

***Please email: mikek@sierrabankruptcy.com or Fax (530) 823-3572 the certificate to the office.**

Once your case has been filed, a hearing date will be automatically scheduled usually 30-40 days from the filing date. Hearings run between the hours of 8 a.m. and 4 p.m. Monday through Friday. This office cannot pick or change the date of the hearing. This is a requirement and filers **MUST** attend and there are **no exceptions**. In extreme emergencies, the hearing can be continued to a later date but the new date is also automatically assigned by the court.

You must bring a PICTURE ID. And SOCIAL SECURITY CARD to your hearing. If you fail to bring both you will be required to appear at a later date to produce them to the trustee and will be charged an additional \$300.00. If you cannot find your Social Security Card, immediately go the Offices of Social Security and obtain a new card. This office does not need copies.

Note: **AFTER** this hearing you will have 30 days to complete a 2nd Credit Counseling /Debtor Education course. **Both are required to qualify for a discharge.** This course is \$14.95 per person and is done online. You will receive a certificate number and date of completion. There is www.50-30-20.com 877-222-4547 but others can also be found on-line.

You will be required to send in proof of your completion of the second credit counseling course to the courts (You will receive form official form 23 with a Notice of requirement to file a statement of completion from the courts in via regular mail) **SEND THIS COMPLETED & SIGNED BACK TO THE COURT.** *This is a legal requirement. Your case will be dismissed, without notice, if it's not done within the required time frame.*

Your Chapter 7 Discharge usually comes 60 days after the hearing date. Be sure to keep the Discharge for your records. From time of filing to discharge is 90-110 days depending on court set timelines.

**RETAIN THESE TWO SHEETS FOR REFERENCE
DO NOT RETURN TO OUR OFFICE.**

BANKRUPTCY LAW OFFICES
Of Stephen J. Johnson
Ph: 530-823-3655 Fax: 530-823-3572
13620 Lincoln Way Suite 220, Auburn, CA 95603

Receiving, Completing and/or returning this questionnaire does not form an attorney/ client contractual relationship. You are not represented until you have a fully executed attorney/client Retainer Agreement signed and dated by the attorney. Until the Retainer Agreement has been fully executed you and your spouse (if applicable) are representing yourself with any and all legal matters. This law firm or any attorney representing this law firm assumes no responsibility in representing you and/or your spouse in any legal matters.

*It is imperative that you answer each and every question contained in this questionnaire as completely and accurately as you can. If you feel that a particular question is not applicable, indicate "N/A" - **Do not leave any part blank.** Email or call the office with any questions. mikek@sierrabankruptcy.com or heidi@sierrabankruptcy.com.*

Chapter ____7 Chapter ____13 Reason Filing a Ch13_____

FILING STATUS: ____Single ____Joint (Married) ____Business ____Corporate

Full Name (**DEBTOR**):_____ Social Security Number:_____

Full Name (**SPOUSE**):_____ Social Security Number:_____

Email Address_____

Phone Number:_____ Cell Phone:_____

Street Address:_____ City_____ Zip_____

County: _____ How long have you lived at current address? _____

Have you lived in California for the past 180 days? Yes: _____ No: _____

Current Mailing Address (if different from above): _____

Other names used by you in the last two years: _____

Have you filed bankruptcy before? Yes___ No___ If yes, provide the following information:

Filed under what name: _____ Approximate date filed:_____

Where filed (County & State):_____ Case number:_____

Current status (i.e. discharged, dismissed, pending):_____

EMPLOYMENT INFORMATION

Current Employer's name (DEBTOR): _____

Employer's address: _____

Position: _____ **Length of time employed:** _____

Occupation if self-employed: _____

Current Employer's name (CO-DEBTOR): _____

Employer's address: _____

Position: _____ **Length of time employed:** _____

Occupation if self-employed: _____

CURRENT MONTHLY W-2 INCOME from Wages
(Please submit your last 6 months of Pay Stubs, documenting your income)

<u>From Most Recent Paystub:</u>	DEBTOR	SPOUSE
Gross monthly income from WAGES:	\$ _____	\$ _____
Total deductions from paycheck	\$ _____	\$ _____
NET MONTHLY (take-home)	\$ _____	\$ _____

OTHER TYPES OF INCOME:

Income from interest/dividends:	\$ _____	\$ _____
Income from RENTAL (monthly gross)	\$ _____	\$ _____
Social Security/Disability:	\$ _____	\$ _____
Unemployment:	\$ _____	\$ _____
Pension or other retirement income:	\$ _____	\$ _____
Child or Spousal Support:	\$ _____	\$ _____

Income from the operation of your BUSINESS (Net) \$ _____

Other (describe): _____

Do you expect any substantial change in your regular income in the immediate future?
Yes___ No___ If so, please describe: _____

TOTAL NET MONTHLY INCOME: Debtor \$ _____ Spouse \$ _____

Total income combined \$ _____

MONTHLY EXPENSES

Number of people in the household: _____

List people you support outside of your household: _____

List all individuals living with you below:

First Name Age Relationship

Rent or mortgage payment: \$ _____ Second mortgage payment \$ _____

Second Property Mortgage: \$ _____ Second mortgage payment \$ _____

Does the mortgage include taxes? _____

Yes

Property Insurance? _____

Yes

*Please list ***average monthly*** expenses, do **not** include credit card payments.

Electricity and Gas		Charitable Contributions	
Water, Sewer & Garbage		Homeowner's/Renter's Ins	
Telephone		Life Insurance (Out of Pocket)*	
Cable & Internet		Health Insurance (Out of Pocket)*	
Cell Phone		Auto Insurance	
Other Utilities (list below)		Other Insurance (list below)	
Home maintenance		Real Estate (property) taxes	
Food		Auto Installment Payment	
Clothing		Auto Installment Payment 2nd	
Laundry/Dry Cleaning		Auto Registration (annual amount divided by 12)	
Medical/Dental Expense (not insurance)		Alimony/Child Support	
Transportation (gas, tolls)		Dependants Not At Home	
Recreation, clubs, dining out		Other Expenses, list below	

REAL PROPERTY: Residence

Address of Property _____ City _____

State: _____ Zip Code: _____ County _____

How is title held? Joint Tenancy ___ Tenancy in Common (50/50) ___ Community Property ___

Whose names are on title? _____

Fair Market Value: _____ *(Hint: to find value use zillow.com)*

Does property have equity? Yes ___ No ___ If so how much equity? _____

1st Mortgage Lender _____ Total Loan balance \$ _____

Address of Lender: _____

Total Monthly payment \$ _____ Payment arrearages (if any) \$ _____

Account No. _____ Property taxes owed (if any) \$ _____

Loan origination year _____

2nd Mortgage Lender _____ Total Loan balance \$ _____

Address of Lender: _____

Total Monthly payment \$ _____ Payment arrearages (if any) \$ _____

Account No. _____ Property taxes owed (if any) \$ _____

Loan origination year _____

Homeowners Association

Address: _____

Account #. _____ Monthly payment \$ _____

Payment arrearages (if any) \$ _____

Do you want to keep the property _____ or surrender the property _____ Not sure _____

Yes

Yes

REAL PROPERTY (Number 2 property other than residence)

Address of Property _____ City _____

State: _____ Zip Code: _____ County _____

How is title held? Joint Tenancy ___ Tenancy in Common (50/50) ___ Community Property ___

Whose names are on title? _____

Is this a: Rental _____ Bare Land _____ Other _____

If rental, how much does it rent for typically? _____ Are there tenants now? _____

Fair Market Value: _____ (*Hint: to find value use zillow.com*)

Does property have equity? Yes ___ No ___ If so how much equity? _____

1st Mortgage Lender _____ Total Loan balance \$ _____

Address of Lender: _____

Total Monthly payment \$ _____ Payment arrearages (if any) \$ _____

Account No. _____ Property taxes owed (if any) \$ _____

Loan origination year _____

2nd Mortgage Lender _____ Total Loan balance \$ _____

Address of Lender: _____

Total Monthly payment \$ _____ Payment arrearages (if any) \$ _____

Account No. _____ Property taxes owed (if any) \$ _____

Loan origination year _____

Homeowners Association

Address: _____

Account #. _____ Monthly payment \$ _____

Payment arrearages (if any) \$ _____

Do you want to keep the property _____ or surrender the property _____ Not sure _____

Yes

Yes

REAL PROPERTY (Number 3 property other than residence)

Address of Property _____ City _____

State: _____ Zip Code: _____ County _____

How is title held? Joint Tenancy ___ Tenancy in Common (50/50) ___ Community Property ___

Whose names are on title? _____

Is this a: Rental _____ Bare Land _____ Other _____

If rental, how much does it rent for typically? _____ Are there tenants now? _____

Fair Market Value: _____ *(Hint: to find value use zillow.com)*

Does property have equity? Yes ___ No ___ If so how much equity? _____

1st Mortgage Lender _____ Total Loan balance \$ _____

Address of Lender: _____

Total Monthly payment \$ _____ Payment arrearages (if any) \$ _____

Account No. _____ Property taxes owed (if any) \$ _____

Loan origination year _____

2nd Mortgage Lender _____ Total Loan balance \$ _____

Address of Lender: _____

Total Monthly payment \$ _____ Payment arrearages (if any) \$ _____

Account No. _____ Property taxes owed (if any) \$ _____

Loan origination year _____

Homeowners Association

Address: _____

Account #. _____ Monthly payment \$ _____

Payment arrearages (if any) \$ _____

Do you want to keep the property _____ or surrender the property _____ Not sure _____

Yes

Yes

PERSONAL ASSETS

Cash on Hand	\$	Alimony, Child Support (Arrearages owed to you)	\$
Checking Account: *Bank Name: Acct. #:	\$	Liquidated Debts owed to you, including <u>Anticipated 2009 Tax Refund</u>	\$
Checking Account: *Bank Name: Acct. #:	\$	Equitable or future interest, life estates, and rights of powers	\$
Savings Account: *Bank Name: Acct. #:	\$	Contingent and Non-contingent interests in estate of a decedent	\$
Household Goods (Garage sale value)	\$	Patents, copyrights and other intellectual property	\$
Books, Pictures & Antiques	\$	Licenses, franchises and other general intangibles	\$
Wearing Apparel (Garage sale value)	\$	Automobiles, trucks, trailers, other accessories	See Next Page
Furs and Jewelry (Pawn Shop Value)	\$	Boats, motors, and accessories	\$
*Firearms, Sports and Hobby Equipment	\$	Aircraft and accessories	\$
Life Insurance Policy, Cash Value (able to borrow against) With:	\$	Office Equipment, furnishings, and supplies (only if used for business)	\$
Education IRA, 401k (ROTH IRA) With:	\$	Machinery, fixtures, equipment and supplies (only if used for business)	\$
Retirement, IRA, 401K With:	\$	Inventory	\$
Security Deposit	\$	Animals	\$
Annuities	\$	Crops-growing or harvested	\$
Government or Corporate Bonds	\$	Points Timeshare	\$
Accounts Receivable	\$	Real Property Timeshare	\$
Stocks, list # of shares owned: Value per share:	\$	Interests in Partnerships or Joint Ventures	

* If you have a firearm, please list make and model below as required by bankruptcy code: _____

Autos, Trucks, Tractors, Dirt Bikes, Trailers, Boats

IF YOU NEED MORE ROOM ATTACH ANOTHER SHEET OR WRITE ON THE BACK OF THIS FORM.

Be sure to include all vehicles in your name

Vehicle 1

Year _____ Make _____ Model (*detailed*) _____ Mileage _____

Value: _____ Do you wish to keep the Car? _____

Name of Lender: _____ Address of Lender _____

Total Amount Owed _____ Monthly Payment _____ Back Payments Owed _____

Condition: _____ Excellent _____ Good _____ Fair _____ Poor

***PLEASE ATTACH KELLY BLUE BOOK PRINT OUT (Private Party Value)**

Vehicle 2

Year _____ Make _____ Model (*detailed*) _____ Mileage _____

Value: _____ Do you wish to keep the Car? _____

Name of Lender: _____ Address of Lender _____

Total Amount Owed _____ Monthly Payment _____ Back Payments Owed _____

Condition: _____ Excellent _____ Good _____ Fair _____ Poor

***PLEASE ATTACH KELLY BLUE BOOK PRINT OUT (Private Party Value)**

Vehicle 3

Year _____ Make _____ Model (*detailed*) _____ Mileage _____

Value: _____ Do you wish to keep the Car? _____

Name of Lender: _____ Address of Lender _____

Total Amount Owed _____ Monthly Payment _____ Back Payments Owed _____

Condition: _____ Excellent _____ Good _____ Fair _____ Poor

***PLEASE ATTACH KELLY BLUE BOOK PRINT OUT (Private Party Value)**

TAXES--Schedule E

21. Do you owe taxes to the IRS, State or County? Yes___ No___ If yes, give details:

Internal Revenue Service (IRS) (Delinquent Taxes currently owed)

Tax year _____ How much owed (total amount) \$ _____

Did you file a return for that year? _____ Was it filed timely or late? _____

Tax year _____ How much owed (total amount) \$ _____

Did you file a return for that year? _____ Was it filed timely or late? _____

Tax year _____ How much owed (total amount) \$ _____

Did you file a return for that year? _____ Was it filed timely? _____

State Franchise Tax Board

Tax year _____ How much owed (total amount) \$ _____

Did you file a return for that year? _____ Was it filed timely or late? _____

Tax year _____ How much owed (total amount) \$ _____

Did you file a return for that year? _____ Was it filed timely or late? _____

Tax year _____ How much owed (total amount) \$ _____

Did you file a return for that year? _____ Was it filed timely? _____

State Board of Equalization (Sales tax or excise tax)

Name of agency: _____

Address: _____

How much owed: _____ Year(s) incurred: _____

What Business? _____

DELINQUENT PROPERTY TAXES (county)

Name and address of taxing agency: _____

Amount owed: \$ _____ What property? _____

SECURED CREDITORS

A Secured Creditor is a person or business that you owe money to but has something attached as collateral or security. If you don't pay as agreed the secured creditor can repossess the collateral.

If you fail to list a creditor or do not provide a correct address, it is possible that the creditor may not be properly notified and will create unnecessary complications with your case. Be sure to include ALL your creditors with their COMPLETE addresses and zip codes as well as, description of collateral, amount owed, market value, installment amount, and past due amount (if any.) **Please do not list any debts already included in another section for a mortgage or car loan.**

NOTE: This section is for SECURED debts only; UNSECURED debt section starts later.

Name of Creditor: _____

Address: _____

Account No: _____ Total Amount Owed \$ _____

Description of property securing loan: _____

Market Value \$ _____ Installment Amount \$ _____ Loan Date _____

Past due (if any) \$ _____ Is creditor trying to repo or foreclose? Yes _____ No _____

Your intentions regarding this debt? Reaffirm _____ Redeem _____ Surrender _____

Is there more than one debt on this property? Yes _____ No _____

If yes, complete a separate creditor record and indicate whether it is a 2nd or 3rd mortgage.

If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Total Amount Owed \$ _____

Description of property securing loan: _____

Market Value \$ _____ Installment Amount \$ _____ Loan Date _____

Past due (if any) \$ _____ Is creditor trying to repo or foreclose? Yes _____ No _____

Your intentions regarding this debt? Reaffirm _____ Redeem _____ Surrender _____

Is there more than one debt on this property? Yes _____ No _____

If yes, complete a separate creditor record and indicate whether it is a 2nd or 3rd mortgage.

If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Total Amount Owed \$ _____

Description of property securing loan: _____

Market Value \$ _____ Installment Amount \$ _____ Loan Date _____

Past due (if any) \$ _____ Is creditor trying to repo or foreclose? Yes _____ No _____

Your intentions regarding this debt? Reaffirm _____ Redeem _____ Surrender _____

Is there more than one debt on this property? Yes _____ No _____

If yes, complete a separate creditor record and indicate whether it is a 2nd or 3rd mortgage.

If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Total Amount Owed \$ _____

Description of property securing loan: _____

Market Value \$ _____ Installment Amount \$ _____ Loan Date _____

Past due (if any) \$ _____ Is creditor trying to repo or foreclose? Yes _____ No _____

Your intentions regarding this debt? Reaffirm _____ Redeem _____ Surrender _____

Is there more than one debt on this property? Yes _____ No _____

If yes, complete a separate creditor record and indicate whether it is a 2nd or 3rd mortgage.

If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

UNSECURED CREDITORS

An Unsecured Creditor is any person or business to whom you owe money, (the loan or credit was extended to you on your "signature" rather than any collateral or security), and who cannot foreclose or repossess a specific piece of your property. Unsecured debts may include but not limited to: credit cards, personal loans, student loans, any person/business claiming a debt against you (even if you disagree)

At your request (recommended by this office) we will pull your credit reports.

***SOME DEBTS ARE NOT INCLUDED ON YOUR CREDIT REPORT. THESE INCLUDE: MEDICAL/DENTAL BILLS, UTILITIES, (CABLE, PHONE, GAS, ELECTRIC...) COLLECTION NOTICES, PERSONAL LOANS AND PRIMARLY BUSINESS RELATED DEBTS.**

These need to be listed below with complete information.

Name of Creditor: _____

Address: _____

Account No: _____ Date _____ Amount Owed \$ _____

*If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Date _____ Amount Owed \$ _____

*If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Date _____ Amount Owed \$ _____

*If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Date _____ Amount Owed \$ _____

*If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Date _____ Amount Owed \$ _____

*If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Date _____ Amount Owed \$ _____

*If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Date _____ Amount Owed \$ _____

*If debt has been assigned to a collection agency or attorney, complete below:

Name of agency or attorney: _____

Address: _____

Name of Creditor: _____

Address: _____

Account No: _____ Date _____ Amount Owed \$ _____

*If debt has been assigned to a collection agency or attorney, complete below:

STATEMENT OF FINANCIAL AFFAIRS

We need your **TOTAL GROSS INCOME** as follows:

NOTE: Gross income is your income before any taxes or deductions. We must have your income listed, please do not write "See Tax Return"

1. Income from Employment, must be broken down by individual for either: W2 income, 1099 income, income from self-employment, or own corporation. If you do not have income from these see #2 below

Gross Income	Debtor	Spouse
2010 YTD		
2009		
2008		

2. Income other than Traditional Employment

(Includes income from Social Security, Unemployment, Contributions from Family, Income from Dividends, Stocks, Annuities, Retirement or Pension, & from Rentals)

	DEBTOR	SPOUSE
2010 YTD	\$ _____ Source of Income:	\$ _____ Source of Income:
2009	\$ _____ Source of Income:	\$ _____ Source of Income:

2009 Tax Refund: Federal _____ State _____

2008 Tax Refund: Federal _____ State _____

3. Have you paid a former creditor (ex. mortgage payments, car payments, credit card) more than \$600 total within the last 90 days? Yes___ No___ If so, provide the name and address of the creditor and the amount and date of each payment:

1. _____
2. _____
3. _____
4. _____

4(a). Are you the plaintiff or defendant in any lawsuit that is currently pending?
Yes___ No___ If yes, give details: (Please also provide paperwork received)_____

Type/Party Names: _____

Case Number: _____

Nature: _____

Status (e.g. Pending, Dismissed, or Judgment): _____

4(b). Has your property or wages been attached or garnished by a person or entity? Yes_____
No___ If so, details:_____

Property or amount of wages: _____

Name of creditor: _____

Date taken (approximate): _____

5. Have you returned any property to a creditor or had any property repossessed during the
last year? Yes___ No___ If so, give details:_____

Name & address of creditor:_____

Date returned:_____

Description of property:_____

Current estimated value of property:_____

6(a). Have there been any assignments of your property for the benefit of any creditors within
the last year? Yes___ No___ If yes, give details: _____

6(b). Is any of your property, in the hands of a receiver, trustee or other liquidating agent?
Yes___ No___ If yes, Name & Address of receiver:_____

Name and location of court:_____

Nature of case:_____

Date of order:_____

Description and value of property:_____

7. Have you made charitable contributions within the last year? Yes___ No___ If so, details:_____

Name & address where donation was made:_____

Description and value of gift or contribution:_____

(Do not include ordinary/usual gifts to family of less than \$200 or charitable contributions less than \$100)

8. Have you had any losses you suffered from fire, theft, or other casualty or gambling within the last year? Yes___ No___ Provide a description of the property and value, a description of the circumstances of the loss and if covered in whole or in part by insurance, a description of the insurance coverage and the date of loss._____

9. Have you made a payment within the last year to any attorney (other than the attorney currently representing you in the filing of this bankruptcy petition), for debt or bankruptcy counseling or representation? Yes___ No___ If so, provide name, address and services provided:_____

10. Have you made any transfer of title on any real or personal property to another person during the last 24 months? Yes___ No___ If yes, give details:_____

Description of Property:_____

Date of Sale or Transfer:_____

Name of Receiving Party:_____

11. Have you closed a bank account in the past year? Yes___ No___ if yes provide the name of the financial institution, date account closed & balance in the account when closed:

Bank Name	Date of Closing	Balance at Closing
1.		
2.		

12. Have you had a safe deposit box or storage unit during the last year? Yes___ No___ If yes, give location, contents, current status:_____

13. Are there any setoffs or credits that should be applied to reduce any of your current debts? Yes___ No___ If yes, please provide details:_____

14. Do you have any property that is NOT yours that you are holding for someone else? Yes___ No___ If yes, give details:_____

15. Prior addresses in which you have resided in the past **3 years** including dates:

Address of Residence	Dates of Residency mo/year-mo/year

16. List any spouses or former spouses who have resided with you in the past **8 years**.

Name	Date of Marriage	Date of Separation	Date of Divorce
1.			
2.			

17. Have you paid back any money owed to a family member in the past 12 months?

Name of Family Member_____Amount Paid_____

18. Do you currently have a loan from a family member or friend?

Name _____Amount_____

19. Do you have any domestic support obligation? Yes___ No___ If yes, give details:_____

20. Does anyone owe you money for any reason? Yes___ No___ If yes, give details:_____

21. Do you have any rights to or have you filed any law suits against a company not listed in the questionnaire? Yes___ No___ If yes, give details:_____

22. Are you a beneficiary or any will, trust or estate? Yes___ No___ If yes, give details:_____

23. Are you entitled to any life insurance proceeds/inheritance as a result of someone's death?

Yes___ No___ If yes, give details: _____

24. Do you expect to inherit anything in the six months following your filing?Yes___ No___ If

yes, give details: _____

25. Have you transferred any balances on your credit cards in the last 6 months?Yes___ No___

If yes, give details: _____

26. Have you authorized any bank to take funds directly from your account in the last year?

Yes___ No___ If yes, give details: _____

27. Do you have credit cards with the bank you have a checking account with?Yes___ No___ If

yes, give details: _____

IF YOU ARE IN A BUSINESS please answer the following questions; (Only answer the questions if you were an officer, director, or managing executive of a corporation; partner or managing executive or a partnership; sole proprietor; self-employed professional; or owned five percent or more of the voting or equity securities).

1) Provide information for any business you were involved in for the last **SIX** years. This includes any business in which you were an officer, director, partner, or managing executive of a corporation, partner in a partnership (or owned 5 percent or more of the voting or equity securities), sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case.

Name and Address of Business	Tax ID	Nature of Business	Start & End Date

2. List each person or entity who has kept your books of account and records of the above described business within the last six years. State name, address, and telephone number of the person or entity and the period of time that they kept books of account and records:_____

3. List each person or entity who has audited your books of account and records of the above described business within the last six years. State name, address, and telephone number of the person or entity and the period of time that they kept books of account and records:_____

4. Provide name, address, and telephone number of the person or entity who currently has possession of the above described books of account and records:_____

5. Provide name and address of any person or entity who has received a financial statement from you within the last two years and the date in which the statement was issued:

6. Have you taken any inventories in your business over the last two years? Yes ___ No ___
If so, provide the following information: Last inventory date: _____

Name & address of person with records: _____

Dollar amount of inventory: _____

Previous inventory date: _____

Name & address of person with records: _____

Dollar amount of inventory: _____

Acknowledgment Statement Under Penalty of Perjury

I have read each and every question and have answered them to the best of my ability and knowledge. I hereby represent that the information I have provided on this questionnaire is true and correct and I understand that this information is going to be used to complete the Petition that will ultimately be filed with the bankruptcy court. I hereby acknowledge that I have received and read additional information with regard to my duties pertaining to any secured debts that I may have.

Client _____ Date _____

Client _____ Date _____