

For Office Use Only

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Payment Information

Rept # \$

BANKRUPTCY CLIENT QUESTIONAIRE

NAME: _____ BIRTHDATE: _____
First Middle Last

Other names: _____ Email: _____

Telephone Number HOME: (____) _____ WORK: (____) _____
CELL: (____) _____

SOCIAL SECURITY NUMBER: _____ - _____ - _____
ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

SPOUSE INFORMATION

NAME: _____ BIRTHDATE: _____
First Middle Last

Other names: _____

SOCIAL SECURITY NUMBER: _____ - _____ - _____
ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

PRIOR BANKRUPTCY CASES:

Have you **ever** filed for bankruptcy? No If Yes: When did you file? _____
Where did you file? _____ What is your case number? _____

REAL ESTATE

Do you own or are you buying a home or rental property? Yes - No

Address of Property: _____

What will the house sell for today? \$ _____ What is the mortgage balance? \$ _____

When did you purchase this property? _____ How much did you pay? _____

Describe property (Ex: 2 bedroom ranch or 2 story brick)

Do you want to keep this property? Yes or No

What financial institution loaned you money for the property? Please include the address
& account numbers

What is your monthly payment? \$ _____

Do you have a second mortgage or lien on the property? Yes or No

What financial institution do you owe for the second mortgage? _____

Are you current on these payments? Yes or No What is your monthly payment \$ _____

PERSONAL PROPERTY

1. How much cash do you have in your pocket (or at home) today? \$ _____

2. How much money is in your Checking? _____ With which Bank? _____

Savings account today? \$ _____ With which Bank? _____

Do you have direct deposit from your employer to any account at a bank? _____

3. Is anyone holding a security deposit? (Landlord?) **Yes - No** If Yes Who? _____

What is their address? _____ How much is the security deposit? \$ _____

4. If you had to put all of your Personal Property (bed, TV, pots & pans etc.) out on the street and sell them in one weekend how much money do you think you would receive for all your personal property? \$ _____

For the following four questions please value the items as if you were going to the local swap shop to get cash, how much would they give you?

5. Do you have any books, photos, art, CD's and Collectibles? **Yes - No** If yes, what is the value of these items? \$ _____

6. Do you own clothing? **Yes - No** If yes, what is the value? \$ _____

7. Do you own any furs or jewelry? **Yes - No** If yes, what is the value? \$ _____

8. Do you own any Sports, photo equipment, hobby equipment, or firearms? **Yes - No**. If Yes, what is the value of those items? \$ _____

9-14. Do you own or have interest in life insurance, stocks, bonds, pensions, 401K, IRAs certificate of deposit (CDs), Santa savers, or partnerships? **Yes - No** If yes, answer, who, what, and where? \$ _____ What is the cash value? \$ _____

Have you had any of the above in the last year? **Yes - No**

15. Does anyone owe you money that you think is collectable? **Yes - No** If yes, please answer, amount owed, who, where, and what for? _____

Do you have a Workman's Comp Claim or Personal Injury Claim? **Yes - No** If yes please answer: attorney representing you, when, where, and what for? _____

16. Does anyone owe you back alimony or child support? **Yes - No**
If yes, who? _____ Amount owed to you? \$ _____

17. Did you file your tax return this year? **Yes - No** **If yes ...You must provide a copy of the return.**

18 - 20. Has anyone died recently or will die soon that you expect to inherit from? **Yes - No** If yes, who, how much, and when? _____

21- 22. Do you have any rights or interest in any Intellectual property - Copyrights, patents or trademarks? **Yes - No** If yes, what and how much is it worth? _____

23. Do you own a car or truck? Yes – No If yes, fill in the following: **(Please include all vehicles titled in your name or that you have COSIGNED for. Please also list all vehicles you may be leasing.)**

1. _____
Year, Make, & Model **Miles on Vehicle**
Name and address of bank, credit union or finance company: _____
How much do you owe? \$ _____ What is your monthly payment? \$ _____
Do you want to keep this vehicle, and keep making the monthly payment? Yes – No
Purchase date: _____ Purchase price: \$ _____

2. _____
Year, Make, & Model **Miles on Vehicle**
Name and address of bank, credit union or finance company: _____
How much do you owe? \$ _____ What is your monthly payment? \$ _____
Do you want to keep this vehicle, and keep making the monthly payment? Yes – No
Purchase date: _____ Purchase price: \$ _____

3. _____
Year, Make, & Model **Miles on Vehicle**
Name and address of bank, credit union or finance company: _____
How much do you owe? \$ _____ What is your monthly payment? \$ _____
Do you want to keep this vehicle, and keep making the monthly payment? Yes – No
Purchase date: _____ Purchase price: \$ _____

24 – 25. Are you buying or do you own a boat, plane, or train? **Yes – No** If yes, please describe property and list any banks that you owe for the property as well as the balance on the loan. _____

26 – 28. Do you own any office equipment, business equipment or business inventory? **Yes – No** If yes, describe. _____

29. Do you own a pet or animal? **Yes – No** If yes, please describe. _____

30 – 32. Do you have any crops, farm equipment, or farm supplies? **Yes – No** If yes please describe and state value. _____

33. Do you have any other personal property of any kind that was not listed above? **Yes – No** If yes, please describe and state value. _____

DEPENDENTS AND INCOME

Please Circle one: Single – Married – Divorced – Separated – Widowed

List all dependents of you and your spouse (even if they do not live with you), their ages, and their relationship to you.

Full Name of Dependent	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Occupation _____
 Length of Employment _____
 Name and Address of your employer

Spouse's Occupation _____
 Length of Employment _____
 Name and Address of spouse's employer

\$ _____ per hour _____ hours/wk
 _____ union dues _____ health ins

\$ _____ per hour _____ hours/wk
 _____ union dues _____ health ins.

Do you or your spouse receive additional income from:

Alimony	Yes – No	If yes, Monthly amount? _____
Child Support	Yes – No	If yes, monthly amount? _____
Social Security	Yes – No	If yes, monthly amount? _____
SS for children	Yes – No	If yes, monthly amount? _____
Link/Food Stamps	Yes – No	If yes, monthly amount? _____
Retirement	Yes – No	If yes, monthly amount? _____
Pension	Yes – No	If yes, monthly amount? _____
Business	Yes – No	If yes, monthly amount? _____
Real Estate/ rent	Yes – No	If yes, monthly amount? _____
Interest	Yes – No	If yes, monthly amount? _____
Other	Yes – No	If yes, monthly amount? _____

Please remember to provide our office with your 2 most recent pay-stubs and your spouse's 2 most recent pay-stubs.

Expenditures

Please **average** all monthly expenditures.

How much do you pay a month for:

Rent or house payment \$ _____

Water/sewer \$ _____

Gas & Electric Bill \$ _____

Telephone & Cell \$ _____

Cable & Satellite TV \$ _____

Garbage \$ _____

Home or Apartment repair \$ _____

Groceries \$ _____

Clothing \$ _____

Meals Away from home \$ _____

Gasoline for you car(s) \$ _____

Auto Insurance \$ _____

Laundry & Dry cleaning \$ _____

Alimony or Child Support \$ _____

Medicine or Dr. visits \$ _____

Personal Products \$ _____

Car Payment(s) \$ _____

Real Estate Taxes/ Ins. \$ _____

Do you have any other monthly expenses not listed above? Yes – No If yes please list them below. Do not include loans or credit cards you will file bankruptcy on.

Type of expense

Amount

How much did you and/or your spouse make this year and the last two years?

Your Income

Spouse's Income

Income made thus

Year to date (2007YTD) \$ _____

\$ _____

Total yearly income

From last year (2006) \$ _____

\$ _____

Total yearly income

From the year before (2005) \$ _____

\$ _____

You must provide a copy of last year's tax return and your most recent pay-stub.

Please answer the following questions completely and to the best of your ability.

1. Have you paid any one creditor that is not your mortgage or car loan, \$500.00 or more within the last 4 months? **Yes- No** Have you been garnished in the last 4 months? **Yes- No** Have you paid off a credit card balance with a different credit card? **Yes- No** Have you made purchases with or taken cash from any credit card in the last 3 months? **Yes - No**

2. Has anyone repossessed or foreclosed on your house or your car within the last year? **Yes – No** Are you suing someone or is anyone suing you? **Yes – No** Has your landlord threatened to or started eviction proceedings against you? **Yes – No** Are any of your debts due to gambling or theft by another? **Yes – No** Have you lost property due to a fire in the last year? **Yes - No**

3. Have you given a gift of more than \$200.00 within the last two years to any one individual? **Yes – No** Have you given an item of property valued at over \$200 to anyone person within the last two years? **Yes – No** Have you paid back any relative money borrowed from them in the last 2 years? **Yes - No**

4. Have you closed any bank accounts within the last year? **Yes – No** Do you have any safety deposit boxes? **Yes – No**

5. Have you lived at your address for the last two years? **Yes – No** Have you owned any real estate (house or land) in the last four years? **Yes – No** Have you ever lived in a community property state, for example California, Arizona, or Alaska? **Yes – No**

6. *Do you owe child support, alimony, maintenance?* **Yes – No** Have you ever been married? **Yes – No**

7. Do you have a loan with a check into cash business? **Yes – No** Have you used personal property (TV, DVD etc.) as collateral for a loan? **Yes – No**

8. Did you borrow money from anyone to pay for our services? **Yes – No** Is someone else paying for your bankruptcy fees? **Yes - No**

HOW DID YOU HEAR ABOUT MY OFFICE? Yellow Pages-American Classified-Friend or Family
