

## Bankruptcy Questionnaire

This questionnaire is VITAL. Each question on here corresponds with a question on your petition for bankruptcy. *If you don't answer the question in here, we can't answer it on your petition and your case may be in trouble.*

### Some Important Rules

1. Answer every question.

Write "n/a" or draw a line through questions that don't apply to you.

2. Include your spouse, even if they're not filing bankruptcy with you.

If they 1) don't live with you AND 2) there is no possibility that they will file bankruptcy with you, you can skip entering their information.

3. List all sources of income.

Work, social security, retirement, child support, alimony, regular help from your family.

4. List all property.

You're sitting in a chair while filling this out, right? Write down the chair, the table, the TV, etc. **We cannot protect your property if you don't list it.**

5. List all debts.

We will pull your credit report, but not all debts show up on there. You do not want us to rely solely on the credit report. *Please* give us as complete a list as possible. **If you leave out one of your creditors, that debt may not be discharged and you might have to pay the amount of that debt to the Trustee/Court.**

If you have questions, write them down. We will go through this questionnaire with you.

**Complete All Questions. Include your SPOUSE'S information EVEN IF they are not filing bankruptcy with you unless they do not live with you and there is no possibility that they will file with you.**

**Today's Date:** \_\_\_\_\_

**1. Name and Residence Information:**

**A.** Your full name: \_\_\_\_\_

Your spouse's full name: \_\_\_\_\_

**B.** Your Social Security Number: \_\_\_\_\_

Your spouse's Social Security Number: \_\_\_\_\_

**C.** Your date of birth and age: \_\_\_\_\_

Your spouse's date of birth and age: \_\_\_\_\_

**D.** List any other names used by you or your spouse (including maiden name), or other ways you have signed your names to papers and checks during the last 8 years:

**E.** Current Address: \_\_\_\_\_

(Street)

\_\_\_\_\_  
(City)

(County)

(Zip Code)

**Check one:**  **Own**  **Rent**

**F.** Telephone Numbers: (Home) \_\_\_\_\_ (Your Cell) \_\_\_\_\_

(Your Email) \_\_\_\_\_

(Spouse's Cell) \_\_\_\_\_

(Spouse's Email) \_\_\_\_\_

**G.** List all addresses YOU OR YOUR SPOUSE had in the last 3 YEARS, the dates when you lived there, and the name you used while living there.

Address

Date Moved In

Date Moved Out

Name Used

**2. Prior Bankruptcies**

- A. Have you or your spouse ever filed bankruptcy before (Chapter 7, 11, 12, or 13)? YES \_\_\_ NO \_\_\_

*IF YES, give details (when did you file, which chapter, who filed?):*

**3. Other Peoples' Bankruptcies:**

- A. Has anyone other than you or your spouse filed a bankruptcy to stop a foreclosure on your home? YES \_\_\_ NO \_\_\_

*IF YES, give details (who filed, when did they file, what happened?):*

- B. If you co-own your home with anyone else (*i.e.*, is anyone else on the Deed), have any of those co-owners filed for bankruptcy in the last 8 years? YES \_\_\_ NO \_\_\_

*IF YES, give details (who filed, when did they file, what happened?):*

**4. Occupation and Income From All Sources:**

A. What's your job title/what do you do: \_\_\_\_\_

B. Name of current employer: \_\_\_\_\_

C. Spouse's job title/what he/she does: \_\_\_\_\_

D. Name of current employer: \_\_\_\_\_

E. How long have you been at your current job? \_\_\_\_\_ Your spouse? \_\_\_\_\_

- F. Do you expect any increases or decreases in your income or your spouse's income in the next year? YES \_\_\_ NO \_\_\_

*IF YES, give details (why do you expect a change?):*

**LAST 6 MONTHS OF INCOME – YOU**

	<b>Month &amp; Year</b>	<b>Amount</b> (Gross, before taxes)	<b>Source</b> (Employer Name or “Social Security,” “Pension,” “Unemployment,” “Alimony”, “Child Support” etc.)
1 month ago:			
2 months ago:			
3 months ago:			
4 months ago:			
5 months ago:			
6 months ago:			

**LAST 6 MONTHS OF INCOME – SPOUSE**

	<b>Month &amp; Year</b>	<b>Amount</b> (Gross, before taxes)	<b>Source</b> (Employer Name or “Social Security,” “Pension,” “Unemployment,” “Alimony”, “Child Support” etc.)
1 month ago:			
2 months ago:			
3 months ago:			
4 months ago:			
5 months ago:			
6 months ago:			

**OWN YOUR OWN BUSINESS OR HAVE OTHER SELF EMPLOYMENT?**

*If you or your spouse had income from your own business or other self-employment, you MUST provide a monthly profit & loss statement for each of the last 6 months. You can use the quick form at the end of this questionnaire if you don't normally keep profit & loss statements.*

**LAST 2 YEARS OF INCOME – YOU**

	<b>Amount</b> (Gross, before taxes)	<b>Source</b> (Employer Name or “Social Security,” “Pension,” “Unemployment,” “Alimony,” “Child Support” etc.)
So far this year:		
Last Year:		
2 years ago:		

**LAST 2 YEARS OF INCOME – SPOUSE**

	<b>Amount</b> (Gross, before taxes)	<b>Source</b> (Employer Name or “Social Security,” “Pension,” “Unemployment,” “Alimony,” “Child Support” etc.)
So far this year:		
Last Year:		
2 years ago:		

**OTHER INCOME, INVESTMENTS, RETIREMENT ACCOUNTS, ETC.**

**G.** Have you or your spouse had your own business (including online shops, “gig” work, self-employment) during the last 6 years? YES \_\_\_ NO \_\_\_

*IF YES: Give dates, name of the business, its address, and the names of others in business with you or your spouse.*

**H.** Are there any debts from your former business? YES \_\_\_ NO \_\_\_

*IF YES: list them in questions 32 and 33 and give details here:*

**I.** Do you owe any employee (including household employees like babysitters and cleaning people) any wages? YES \_\_\_ NO \_\_\_

*IF YES: give name and address of employee, dates worked, amount owed, and work done:*

**J.** Has anyone ever paid you for services or products that you did not provide? YES \_\_\_ NO \_\_\_

*IF YES: give details (who, what, where, when):*

**K.** Have you or anyone in your household been on welfare at any time in the last 2 years? YES \_\_\_ NO \_\_\_

*IF YES: who was it, how much did they get, what agency paid them, when did they get it?*

**L.** Have you ever received (or been told you received) more money from the government than you were supposed to (e.g., social security, welfare, unemployment, food stamps, etc)? YES \_\_\_ NO \_\_\_

*IF YES, give details (what type, when, what happened):*

**M.** Does your employer owe you vacation time or back pay? YES \_\_\_ NO \_\_\_

*IF YES, how much and what is it for?*

**N.** Do you have an IRA, 401(k), 403(b), pension, or other retirement plan? YES \_\_\_ NO \_\_\_

*IF YES, where (Fidelity, Charles Schwab, etc), how much is in it, what type of plan is it?*

**O.** Have you contributed or paid into a tuition program, 529 Plan, or tuition credits/certificates for yourself or anyone else? YES \_\_\_ NO \_\_\_

*IF YES, what type, where is the account, how much is in it, who is it for:*

**P.** Are you the beneficiary of any trust, life estate, or other future interest? YES \_\_\_ NO \_\_\_

*IF YES, give details:*

**Q.** Are you expecting a gift or life insurance proceeds of more than \$500 in the next year? YES \_\_\_ NO \_\_\_

*If YES, give details:*

**R.** Do you expect to inherit any money or property in the next year? YES \_\_\_ NO \_\_\_

*If YES, give details:*

**S.** Has anyone died and left you anything (including insurance benefits) in the last 2 years? YES \_\_\_ NO \_\_\_

*If YES, give details:*

**5. Taxes:**

**A.** Last year, did you get a tax refund? If so, how much? YES \_\_\_ NO \_\_\_

Year: \_\_\_\_\_ State \$ \_\_\_\_\_ Federal \$ \_\_\_\_\_

When did you file your return? \_\_\_\_\_

Is any other person (such as your spouse) entitled to part of your refund? YES \_\_\_ NO \_\_\_

*If YES, give details:*

Did you claim the Earned Income Credit? YES \_\_\_ NO \_\_\_

Did anyone intercept this refund (e.g., CCU, child support, back taxes)? YES \_\_\_ NO \_\_\_

*If YES, give details:*

Did you sign an agreement or refund anticipation loan with a tax preparer to get your refund early? YES \_\_\_ NO \_\_\_

*IF YES, which company and when?*

**B.** Do you expect a refund this year? If so, how much? YES \_\_\_ NO \_\_\_

Year: \_\_\_\_\_ State \$ \_\_\_\_\_ Federal \$ \_\_\_\_\_

Will any other person (such as your spouse) be entitled to part of your refund? YES \_\_\_ NO \_\_\_

*If YES, give details:*

Do you expect to claim the Earned Income Credit? YES \_\_\_ NO \_\_\_

Do you expect anyone to intercept this refund (e.g. child support, back taxes)? YES \_\_\_ NO \_\_\_

*If YES, give details:*

Did you sign an agreement or refund anticipation loan with a tax preparer to get your refund early? YES \_\_\_ NO \_\_\_

*IF YES, which company and when?*

**PREVIOUS YEARS**

**C.** Have you filed income tax returns every year for the last seven years? YES \_\_\_ NO \_\_\_

*IF NO, which years did you file and why didn't you file the rest?*

**D.** Do you owe any taxes to the United States? YES \_\_\_ NO \_\_\_

*IF YES, what are the taxes for (e.g., income, employment, property taxes) and for what year?*

**E.** Do you owe taxes to any states? YES \_\_\_ NO \_\_\_

*IF YES, what are the taxes for (e.g., income, employment, property taxes) and for what year?*

**F.** Do you owe taxes to any counties, cities, or local governments? YES \_\_\_ NO \_\_\_

*IF YES, what are the taxes for (e.g., income, employment, property taxes) and for what year?*

G. Besides taxes, do you owe any other money to any branch of the United States Government (e.g., FHA, VA, repossessions or loans, withholding taxes [if you owned a business], or money owed to the Small Business Administration)? YES \_\_\_ NO \_\_\_

*IF YES, give details:*

**6. Debts Repaid in the last year (including debts to family members):**

A. In the last **90 days**, did you pay anyone \$600 or more (including family members)? YES \_\_\_ NO \_\_\_

*IF YES, give details (name (and relationship to you, if any), address, amount, date, reason):*

B. In the last **YEAR** have you paid **ANYTHING** to any family members or business partners? YES \_\_\_ NO \_\_\_

*IF YES, give details (name (and relationship to you), address, amount, date, reason):*

**STUDENT LOANS**

C. Have you ever had a student loan? YES \_\_\_ NO \_\_\_

How much was the loan? \_\_\_\_\_

Which lender lent you the money? \_\_\_\_\_

What school was the loan for? \_\_\_\_\_

Did you graduate?

YES \_\_\_ NO \_\_\_

Who do you make payments to now? \_\_\_\_\_

How much have you paid? \_\_\_\_\_

What are your monthly payments? \_\_\_\_\_

What is the current balance of the loan? \_\_\_\_\_

Has anyone else paid on the loan for you?

YES \_\_\_ NO \_\_\_

*IF YES, give details (name (and relationship to you), address, amount, date, reason):*

D. Have you ever cosigned on a student loan for **someone else**? YES \_\_\_ NO \_\_\_

Who? \_\_\_\_\_

What is their relationship to you? \_\_\_\_\_

Are they a dependent of yours? \_\_\_\_\_

How much was the loan? \_\_\_\_\_

Which lender lent them the money? \_\_\_\_\_

What school was the loan for? \_\_\_\_\_

YES \_\_\_ NO \_\_\_

Did they graduate?

Who do you/or they make payments to now? \_\_\_\_\_

What are the monthly payments? \_\_\_\_\_

What is the current balance of the loan? \_\_\_\_\_

**7. Lawsuits, Workers' Comp & Criminal Charges:**

**A.** Have you ever BEEN SUED by any person, company, or organization?

YES \_\_\_ NO \_\_\_

*IF YES, give details (who sued you, which court, case number, type of case, what happened):*

**B.** Have any lawsuits resulted in a lien on your home or property?

YES \_\_\_ NO \_\_\_

*IF YES, tell us which lawsuit, judgment amount, and whether the lien is paid off:*

**C.** Have you ever SUED ANYONE?

YES \_\_\_ NO \_\_\_

*IF YES, give details (who you sued, which court, case number, type of case, what happened):*

**D.** Do you have any possible reason for suing someone (e.g., car accident, property damage, contract dispute)?

YES \_\_\_ NO \_\_\_

*IF YES, give details (who you might sue, why, what happened, how much):*

**E.** Do you have any criminal charges or convictions?

YES \_\_\_ NO \_\_\_

*IF YES, give details (what were the charges, which court, case number, what happened):*

**F.** Have you been involved in any administrative agency cases (unemployment compensation, worker's compensation, etc.) in the past 12 months?

YES \_\_\_ NO \_\_\_

*IF YES, give details (which agency, type of case, case number, what happened):*

**8. Garnishment, Foreclosure, Tax Sale & Levy:**

**A.** Have you ever had any property listed for or sold at a foreclosure, tax sale, or sheriff's sale, or had property levied upon?

YES \_\_\_ NO \_\_\_

*IF YES, give details (what was sold or listed for sale, value, date of sale/listing, who sold or tried to sell it):*

- B.** Has money from your paycheck, bank account or credit union account been garnished or have you had money frozen by a creditor because of a debt? YES \_\_\_ NO \_\_\_

*IF YES, give details (what creditor took it (name and address), when, how much, from where (bank account, paycheck, etc.):*

**9. Repossessions and Returns:**

- A.** Have you had any property or merchandise repossessed during the last 2 years? YES \_\_\_ NO \_\_\_

*IF YES, give details (what was it, what creditor took it (name and address), when, how much was it worth):*

- B.** Have you voluntarily returned any financed property or merchandise to the seller in the past 2 years (*i.e.*, property you took out a loan for, but returned the property instead of paying the loan)? YES \_\_\_ NO \_\_\_

*IF YES, give details (what was it, what creditor did you give it to (name and address), when, how much was it worth):*

**10. Does Anyone Have Something of Yours? (e.g., Storage Units, Payday Loans, Pawnbrokers):**

- A.** Have you used a payday lender or check cashing service in the last 6 months? YES \_\_\_ NO \_\_\_

*IF YES, give details (what lender/store, address, date, amount of check):*

- B.** Have you used an auto title lender in the last year? YES \_\_\_ NO \_\_\_

*IF YES, give details (what lender/store, address, date, amount of check):*

- C.** Is any of your property with a pawn broker, repair person, storage company, or consignment shop? YES \_\_\_ NO \_\_\_

*IF YES, give details (what lender/store, address, date you gave it to them, what they have, value of the property):*

- D.** Is any of your property held by a court-appointed person (a receiver), or in the hands of a person who is holding it for your benefit and use (a trustee)? YES \_\_\_ NO \_\_\_

*IF YES, give details (name of receiver/trustee, address, what they have, value of the property, why they have it):*

**RECENT DEBT SETTLEMENTS OR ASSIGNMENTS**

- E.** In the past 2 years, have you made any settlements with a creditor? YES \_\_\_ NO \_\_\_

*IF YES, give details (name of creditor, address, how much you owed, how much you paid):*

- F. In the past 2 years, have you given any property to a creditor to settle a debt (i.e., "assignment")? YES \_\_\_ NO \_\_\_

*IF YES, give details (name of creditor, address, how much you owed, what you gave them, the value of what you gave them):*

**11. Gifts and Transfers:**

- A. In the past 4 years, have you sold or transferred (including gifts) any property worth more than \$1,000? YES \_\_\_ NO \_\_\_

*IF YES, give details (what you sold/transferred, who received it (name, address, and relationship to you (if any)), date of transfer, amount):*

- B. In the past 10 years, have you used any money from the sale or transfer of property to purchase or improve your current home or pay down your mortgage? YES \_\_\_ NO \_\_\_

*IF YES, give details (what you sold/transferred, who received it (name, address, and relationship to you (if any)), date of transfer, amount, what you used the money for):*

**12. Losses (Theft, Fire, Gambling, etc.):**

- A. In the last year, did you lose more than \$1,000 as a result of fire, theft, storm damage, accident, or gambling? YES \_\_\_ NO \_\_\_

*IF YES, give details (what was lost/damaged, value, date of loss, what happened):*

Did insurance pay (or do you expect them to pay) for any part of this loss? YES \_\_\_ NO \_\_\_

Date of payments: \_\_\_\_\_

Amount of payment(s): \_\_\_\_\_

**13. Payments or Transfers to Attorneys, Credit Counselors, or Debt Consultants:**

- A. Other than us, did you talk to any attorney or bankruptcy consultant (petition preparer, paralegal) in the past year? YES \_\_\_ NO \_\_\_

*IF YES, give details (name/address, when you spoke to them, why you spoke to them):*

How much did you agree to pay them? \_\_\_\_\_

How much did you actually pay them (if any)? \_\_\_\_\_

What did they do for you (if anything)?

**B.** In the past year, did you talk to any credit counseling agency or debt settlement company? YES \_\_\_ NO \_\_\_

*IF YES, give details (name/address, when you spoke to them, why you spoke to them):*

Did the agency have you sign up for a plan to repay or settle your debts? YES \_\_\_ NO \_\_\_

*IF YES, give details (what were the terms of the payment plan):*

How much did you actually pay them (if any)? \$\_\_\_\_\_

What did they do for you (if anything)?

**C.** Other than us, did you consult with anyone else about your debts in the past year? YES \_\_\_ NO \_\_\_

*IF YES, give details (name/address, when you spoke to them, why you spoke to them):*

**D.** Do any of your debts come from a refinancing or consolidation loan? YES \_\_\_ NO \_\_\_

*IF YES, give details (which debts, name of creditors, amount):*

**14. Closed Bank Accounts:**

**A.** Have you or your spouse had your name on any bank account (such as savings, checking, CDs) during the past **12 months** that is now closed? YES \_\_\_ NO \_\_\_

*IF YES, give details (bank, type of account, account number, who else was on the account (if any), date closed, final balance):*

**15. Safe Deposit Boxes:**

**A.** Have you or your spouse had a safe deposit box during the last **12 months**? YES \_\_\_ NO \_\_\_

*IF YES, give details (bank, name of everyone with access to the box, contents of the box, and date it was closed (if you no longer have the box)):*

**16. Property Held for Another Person:**

**A.** Are you holding onto any money, property, furniture, etc. that belongs to another person (or that you're holding in trust)? YES \_\_\_ NO \_\_\_

*IF YES, give details (whose property is it (and are they related to you), what is it, what is the value, why do you have it):*

Where are you keeping the property (give the full address):

**17. Leases:**

**A.** Have you or your spouse had an auto lease in the last **4 years**? YES \_\_\_ NO \_\_\_

*IF YES, give details (name and address of creditor, make/model of car, terms of the lease):*

**B.** Have you or your spouse had any rent-to-own property in the last **4 years**? YES \_\_\_ NO \_\_\_

*IF YES, give details (name and address of creditor, description of property, terms of the rent-to-own deal):*

**18. Cooperatives:**

**A.** Are you or your spouse a member of any type of cooperative (housing, food, agricultural, etc). YES \_\_\_ NO \_\_\_

*IF YES, give details (name and address of co-op, what you pay, what you get):*

**19. Alimony, Child Support, and Property Settlements:**

**A.** Have you or your spouse had any previous marriages? YES \_\_\_ NO \_\_\_

*IF YES, give details (name of spouse, dates of marriage/divorce):*

*\*\*Don't forget to include any debts from prior marriages with your other debts below\*\**

**B.** Does anyone owe you or your spouse alimony or child support? YES \_\_\_ NO \_\_\_

Who is it supposed to support (e.g., you, spouse, child): \_\_\_\_\_

Who pays? \_\_\_\_\_

Is it alimony, child support, or something else? \_\_\_\_\_

How much do they pay each month? \_\_\_\_\_

If they're behind on payments, how much are they behind? \_\_\_\_\_

\_\_\_\_\_

**C.** Do you or your spouse pay anyone alimony or child support? YES \_\_\_ NO \_\_\_

Who pays (you or your spouse)? \_\_\_\_\_

Who do you/spouse pay? \_\_\_\_\_

Is it alimony, child support, or something else? \_\_\_\_\_

How much is paid each month? \_\_\_\_\_

If you/spouse are behind on payments, how much are you/they behind?

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Is the person you are supporting also on welfare? YES \_\_\_ NO \_\_\_

**D.** Are you and your spouse in the middle of or contemplating a divorce or separation? YES \_\_\_ NO \_\_\_

*IF YES, give details (where are you in the process, do you still live together, etc):*

**E.** Do you or your spouse have any family court hearings coming up? YES \_\_\_ NO \_\_\_

*IF YES, give us the date of the hearing, the court, and the reason for the hearing:*

**F.** Do you or your spouse expect to be involved in a property settlement with an ex-spouse in the next year? YES \_\_\_ NO \_\_\_

*IF YES, give details:*

**20. Accidents and Driver's License:**

**A.** Have you been involved in a vehicle accident in the last 4 years (passenger or driver), including bus accidents? YES \_\_\_ NO \_\_\_

*IF YES, give details:*

**B.** Has your vehicle been involved in an accident in the last 4 years (whether you were in it or not)? YES \_\_\_ NO \_\_\_

*IF YES, give details:*

**C.** Have your children ever injured anyone else or someone else's property? YES \_\_\_ NO \_\_\_

*IF YES, give details:*

**D.** Have you ever had your driver's license suspended or revoked? YES \_\_\_ NO \_\_\_

*IF YES, give details (when, why, did you get it back):*

**21. Cosigners and Debts Incurred for Other People:**

**A.** Are any of your debts cosigned by someone else (other than your spouse)? YES \_\_\_ NO \_\_\_

*IF YES, give details (cosigner's name and address, which debts are cosigned):*

- B.** Have you ever been the cosigner on someone else’s loan or debt **which hasn’t been paid off yet?** YES \_\_\_ NO \_\_\_

*IF YES, tell us the name and address of the creditor, the date of the loan/financing, the amount still owed, and the name and address of the person you cosigned for:*

- Did you put up any of your property as collateral for this debt? YES \_\_\_ NO \_\_\_

*IF YES, tell us what property you used and how much it’s worth:*

- C.** Have you borrowed any money for someone else’s benefit and still owe money on it? YES \_\_\_ NO \_\_\_

*IF YES, tell us the name and address of the creditor, the date of the loan/financing, the amount still owed, and the name and address of the person you borrowed money for:*

**22. How You’ve Used Credit Recently:**

- A.** In the last 90 days did you take any cash advances for \$750 or more? YES \_\_\_ NO \_\_\_

*IF YES, tell us the date, how much you took, from which credit card/account, and what you used the money for:*

- B.** In the last 90 days did you use a credit card to purchase more than \$500 worth of goods or services? YES \_\_\_ NO \_\_\_

*IF YES, tell us the date, what you bought, how much it was, where you bought it, and which credit card/account you used:*

- C.** Are any of your current debts to finance companies that asked you to list some of your property (e.g., paycheck, furniture, jewelry) or the property you were purchasing as security/collateral for the loan? YES \_\_\_ NO \_\_\_

*IF YES, tell us which finance company, the balance of the debt, and what property was used as security/collateral:*

**23. Evictions:**

- A.** Has your current landlord sued you or brought an eviction suit against you? YES \_\_\_ NO \_\_\_

*IF YES, tell us why they’re suing you, how much they claim you owe, and what happened in the lawsuit:*

- B.** Does your current landlord have an eviction judgment or order against you? YES \_\_\_ NO \_\_\_

*If YES, and the eviction is based on your nonpayment of rent, tell us what your regular rent payments are, if they’re monthly/weekly/etc, and the amount of your back rent:*

C. Is your landlord threatening to sue you or bring an eviction against you? YES \_\_\_ NO \_\_\_

*IF YES, how much do they claim you owe?*

Are they claiming that you damaged the property? YES \_\_\_ NO \_\_\_

Are they claiming that you used illegal drugs on the property? YES \_\_\_ NO \_\_\_

**24. Your Debts:**

- ➔ This section is EXTREMELY IMPORTANT.
- ➔ We will pull your credit report, but not everything shows up on there. Please don't make us rely on that credit report alone.
- ➔ If you don't list a debt, it may not be discharged in your bankruptcy and you may have to pay the amount owed to the Court/Trustee.

**List EVERYONE you owe money to. Don't forget payday loans, title loans, family members, medical debts, school loans, old apartments, car repossessions, utility bills.**

	<b>Creditor Name &amp; Address</b>	<b>Account #</b>	<b>Current Balance</b>	<b>Date of last payment?</b>	<b>Who owes (you or spouse)?</b>	<b>Was this a loan for a car, house, or other property or did you promise to give the creditor property if you didn't pay? <i>IF YES, what property?</i></b>
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						

	<b>Creditor Name &amp; Address</b>	<b>Account #</b>	<b>Current Balance</b>	<b>Date of last payment?</b>	<b>Who owes (you or spouse)?</b>	<b>Was this a loan for a car, house, or other property or did you promise to give the creditor property if you didn't pay?  <i>IF YES, what property?</i></b>
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						

*Attach additional pages if necessary*

**A.** Do you dispute any of these debts? YES \_\_\_ NO \_\_\_

*IF YES, give details?*

**B.** Review the list of debts you just wrote down. Do you have any of these listed below? If you do, go back and add them to the list.

Medical bills? YES \_\_\_ NO \_\_\_

Mail order bills? YES \_\_\_ NO \_\_\_

Condo/HOA assessments? YES \_\_\_ NO \_\_\_

Old utility, telephone, or cell phone bills? YES \_\_\_ NO \_\_\_

School tuition or other student debts/loans? YES \_\_\_ NO \_\_\_

Traffic tickets/parking tickets? YES \_\_\_ NO \_\_\_

Judgments against you? YES \_\_\_ NO \_\_\_

Loans from relatives? YES \_\_\_ NO \_\_\_

Store cards? YES \_\_\_ NO \_\_\_

Welfare debt you have to pay back? YES \_\_\_ NO \_\_\_

Criminal restitution? YES \_\_\_ NO \_\_\_

Co-signed debts? YES \_\_\_ NO \_\_\_

Back rent or old apartment debt? YES \_\_\_ NO \_\_\_

Payday loans or title loans? YES \_\_\_ NO \_\_\_

Loans on your retirement/pension? YES \_\_\_ NO \_\_\_

**25. Your Assets:**

**LIST EVERYTHING. If you don't list it, we can't protect it.**

**REAL PROPERTY**

**A.** Do you own your home? YES \_\_\_ NO \_\_\_

Whose name(s) is on the deed (*e.g.*, you, you and spouse, you and someone else)? \_\_\_\_\_

If it's you and your spouse, were you married when you bought the house? YES \_\_\_ NO \_\_\_

Purchase price: \_\_\_\_\_ Date purchased: \_\_\_\_\_

Original mortgage amount: \_\_\_\_\_

Present value of your house: \_\_\_\_\_

Outstanding mortgage balance: \_\_\_\_\_

Are there any other mortgages? YES \_\_\_ NO \_\_\_

*IF YES, give the name and address of each company:*

If you didn't purchase the house, how did you get it (*e.g.*, inheritance, gift)?

Have you used any funds that you did not borrow to purchase or improve your home? YES \_\_\_ NO \_\_\_

*IF YES, how much, when, where did the money come from, what did you use it for?*

**B.** Do you own other real estate (not your home)? This could be a rental property, vacation home, a family member's house where you're on the deed, even a burial plot)? YES \_\_\_ NO \_\_\_

Address: \_\_\_\_\_

County: \_\_\_\_\_

Whose name(s) is on the deed (*e.g.*, you or you and spouse)?  
\_\_\_\_\_

Purchase price: \_\_\_\_\_ Date purchased: \_\_\_\_\_

Original mortgage amount: \_\_\_\_\_

Present value of the property: \_\_\_\_\_

Outstanding mortgage balance: \_\_\_\_\_

If you didn't purchase the house/property, how did you get it (e.g., inheritance, gift)?

Have you used any funds that you did not borrow to purchase or improve the house/property? YES \_\_\_ NO \_\_\_

*IF YES, how much, when, where did the money come from, what did you use it for?*

### CARS, TRUCKS, MOTORCYCLES, TRAILERS, RVs, MOBILE HOMES

C.	Year	Make	Model	Trim (e.g., EX LX, V6)	Mileage	Whose names are on the title?	How much are your monthly payments (if any)?
1.							
2.							
3.							
4.							
5.							
6.							

### ITEMS IN YOUR HOME

**LIST EVERYTHING. If you don't list it, we can't protect it.**

D.	Category	Description	Yard Sale/Thrift Store Value
	Kitchen furniture		
	Kitchen appliances		
	Dishes & china		
	Dining room furniture		
	Living room furniture		
	Bedroom furniture (in each bedroom)		

<b>D.</b>	<b>Category</b>	<b>Description</b>	<b>Yard Sale/Thrift Store Value</b>
	Electronics ( <i>e.g.</i> , TVs, Xbox)		
	Clothes & accessories		
	Jewelry (real stuff, not costume jewelry)		
	Outdoor furniture		
	Grills, barbeques, smokers		
	Playground equipment		
	Artwork		
	Guns		
	Collectibles		
	Medical equipment ( <i>e.g.</i> , wheelchairs, power chairs, medical beds, etc)		
	Property in a storage unit		
	Other property		

**CASH, BANK ACCOUNTS, AND INVESTMENTS**

**E.** How much cash do you have in your wallet or around your car/house, etc?

\_\_\_\_\_

**F.** Do you have any bank accounts, including credit unions and savings & loans? YES \_\_\_ NO \_\_\_

*IF YES, fill out the information below for each account:*

	<b>Bank Name</b>	<b>Who is on the account?</b>	<b>Current Balance</b>	<b>Account Number</b>
<b>1.</b>				
<b>2.</b>				
<b>3.</b>				
<b>4.</b>				
<b>5.</b>				

Is your name on anyone else's bank account? YES \_\_\_ NO \_\_\_

*IF YES, whose account is it, what's their relationship to you, which bank is it at, how much is in the account, and why is your name on it?*

**OTHER PERSONAL PROPERTY**

**G.** Have you given a security deposit to anyone (e.g., landlord, utility, storage facility)? YES \_\_\_ NO \_\_\_

*IF YES, who did you give it to, when, how much did you give them?*

**H.** Do you own a boat, jet ski, trailer, airplane, or other moving item (not already listed)? YES \_\_\_ NO \_\_\_

*IF YES, give details (what is it (year, make, model, etc), how much is it worth, is there a loan on it):*

**I.** Do you own any life insurance policies? YES \_\_\_ NO \_\_\_

Name & address of insurance company: \_\_\_\_\_

How long have you had the policy? \_\_\_\_\_

Can you borrow against it (i.e., does it have cash surrender value)? YES \_\_\_ NO \_\_\_

*IF YES, how much? \_\_\_\_\_*

**J.** Do you expect to receive any money from any insurance policy in the next year (e.g., for a car accident, personal injury, home insurance claim, etc)? YES \_\_\_ NO \_\_\_

*IF YES, give details:*

**K.** Do you own any stocks that are not in an investment account already reported above (e.g., employer stock option plans, individual stock certificates)? YES \_\_\_ NO \_\_\_

*IF YES, tell us what it is and how much it's worth:*

**L.** Do you own any bonds (including U.S. Savings Bonds) that are not in an investment account already reported above? YES \_\_\_ NO \_\_\_

*IF YES, tell us what it is and how much it's worth:*

**M.** Do you own any machinery, tools, or fixtures that you use in your business or work (e.g., mechanics tools, computers used just for work, etc)? YES \_\_\_ NO \_\_\_

*IF YES, tell us what it is and how much it's worth (thrift store value):*

**N.** Do you have any animals or pets? (don't worry, regular household pets aren't going to be taken) YES \_\_\_ NO \_\_\_

Are they pure bred, show animals, farm animals, or otherwise worth more than the average household pet? YES \_\_\_ NO \_\_\_

*IF YES, describe them and tell us how much they are worth:*

**O.** Are you owed any commissions or other payments from a previous job? YES \_\_\_ NO \_\_\_

*IF YES, give us details, including how much you're owed:*

**P.** Does anyone owe you money (that you haven't already mentioned)? YES \_\_\_ NO \_\_\_

*IF YES, give us details:*

**Q.** Do you have any inventory for a business (e.g., online shops, MLM businesses, Tupperware/Pampered Chef/Scentsy/Beachbody/Plexus, etc.)? YES \_\_\_ NO \_\_\_

*IF YES, give us details, including value:*

**R.** Do you own anything else not mentioned above? YES \_\_\_ NO \_\_\_

*IF YES, give us details, including value:*

**S.** Does any property you own possess a threat of harm to public health or safety (e.g., lead poisoning, rundown property, dangerous conditions)? YES \_\_\_ NO \_\_\_

*IF YES, give us details:*

**26. Income**

	<b>YOU</b>	<b>SPOUSE</b>
<b>A.</b> When do you receive your income/paycheck?	Weekly ___	Weekly ___
<i>Check one:</i>	Every 2 weeks ___	Every 2 weeks ___
	Monthly ___	Monthly ___
	Other _____	Other _____
<b>B.</b> What is the gross amount received in wages/other income (before taxes and other deductions)?	\$ _____	\$ _____
<b>C.</b> What deductions, if any, are taken out?		
	Taxes: \$ _____	\$ _____
	Insurance: \$ _____	\$ _____

Union Dues: \$ \_\_\_\_\_ \$ \_\_\_\_\_  
 Retirement: \$ \_\_\_\_\_ \$ \_\_\_\_\_  
 Child Support: \$ \_\_\_\_\_ \$ \_\_\_\_\_  
 Garnishment: \$ \_\_\_\_\_ \$ \_\_\_\_\_  
 Other: \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**D.** What's the usual amount of your check (your take-home pay)? \$ \_\_\_\_\_ \$ \_\_\_\_\_

**E.** Is your job seasonal or does your pay change during the year (e.g., teachers who are only paid for 10 months)? YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_

*IF YES, how does it change and when?*

**F.** What was your gross income (reported on your W-2 and tax return) for last year? \$ \_\_\_\_\_ \$ \_\_\_\_\_

**G.** If you receive alimony, maintenance, or support from someone (for yourself or a dependent), how much do you get per month? \$ \_\_\_\_\_ \$ \_\_\_\_\_

**H.** Do you expect your income to increase or decrease in the next year? YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_

*IF YES, give details (how much of a change do you expect, why do you expect a change?):*

Do you, your spouse, or your dependents receive income or support from any other source not already listed above (such as public assistance, unemployment compensation, social security, SSI, pension, family support, etc.)? YES \_\_\_ NO \_\_\_ YES \_\_\_ NO \_\_\_

Source: \_\_\_\_\_ Source: \_\_\_\_\_

Amount per month: \_\_\_\_\_ Amount per month: \_\_\_\_\_

**I.** Is your family eligible for food stamps? YES \_\_\_ NO \_\_\_

*IF YES, how much do you receive each month?:*

**J. DEPENDENTS**

List all dependents of you and/or your spouse (whether they live with you or not):

Dependent of you, your spouse, both of you?	Name	Age	Relationship
---	------	-----	--------------

List all people who live with you (full or part time):

Name	Age	Relationship
------	-----	--------------

**27. Your Expenses:**

**A. List your average monthly expense for your household.**

<b>Category</b>	<b>Average Monthly Expense</b>	<b>List Any Decrease or Increase You Expect in the Next Year</b>
Rent or mortgage:	\$ _____	\$ _____
Real estate taxes (if not included in your mortgage):	\$ _____	\$ _____
Property taxes (if not included your mortgage):	\$ _____	\$ _____

Condo or Homeowners Association Fees:	\$ _____	\$ _____
Home maintenance (repairs/upkeep):	\$ _____	\$ _____
Trash Pickup:	\$ _____	\$ _____
Electricity:	\$ _____	\$ _____
Heat:	\$ _____	\$ _____
Water:	\$ _____	\$ _____
Telephone/Cell:	\$ _____	\$ _____
Internet:	\$ _____	\$ _____
Cable TV:	\$ _____	\$ _____
Other Utilities:	\$ _____	\$ _____
Food (groceries and eating out):	\$ _____	\$ _____
Amount of Food Stamps You Spend:	\$ _____	\$ _____
Personal Care (haircuts, etc.):	\$ _____	\$ _____
Clothing:	\$ _____	\$ _____
Laundry and dry cleaning:	\$ _____	\$ _____
Medications:	\$ _____	\$ _____
Other Medical and Dental Expenses (co-pays, eye care, etc., but not monthly premiums):	\$ _____	\$ _____
Public transportation:	\$ _____	\$ _____
Auto maintenance (repairs and upkeep):	\$ _____	\$ _____
Gas for your car(s):	\$ _____	\$ _____
Newspapers, magazines, school books:	\$ _____	\$ _____
Recreation/Entertainment:	\$ _____	\$ _____
Charitable Contributions/Tithing:	\$ _____	\$ _____
Club & Union Dues (not taken out of your paycheck):	\$ _____	\$ _____
Insurance (not taken out of your paycheck):		
Homeowners' or Renters:	\$ _____	\$ _____
Life:	\$ _____	\$ _____
Health:	\$ _____	\$ _____
Auto:	\$ _____	\$ _____

Other _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in your mortgage payment):	\$ _____	\$ _____
Loan Installment Payments:		
Car Loan 1:	\$ _____	\$ _____
Car Loan 2:	\$ _____	\$ _____
Other _____	\$ _____	\$ _____
Other _____	\$ _____	\$ _____
Alimony, maintenance, or support payments:	\$ _____	\$ _____
Child support and other payments to support your dependents:	\$ _____	\$ _____
Other expenses ( <i>e.g.</i> , cigarettes, diapers, security system, school, birthday, holiday gifts, pets)		
Identify _____	\$ _____	\$ _____
Identify _____	\$ _____	\$ _____
Identify _____	\$ _____	\$ _____
Identify _____	\$ _____	\$ _____
Identify _____	\$ _____	\$ _____
Identify _____	\$ _____	\$ _____
Identify _____	\$ _____	\$ _____

**B.** If you and your spouse are not filing bankruptcy together, does your spouse (who is not filing bankruptcy) have any monthly expenses listed above that are not paid towards your household expenses (such as child support payments your spouse makes to a former spouse or payments your spouse makes on separate debts)? YES \_\_\_ NO \_\_\_

*IF YES, tell us which expenses are for your spouse alone and don't go toward household expenses:*

**C.** Do you have any monthly expenses not listed above that you pay to support an elderly, chronically ill, or disabled member of your household or your immediate family? YES \_\_\_ NO \_\_\_

*IF YES, how much do you pay and who are you supporting?*

**D.** Do you have any monthly expenses not listed above that you pay to keep your family safe from domestic violence? YES \_\_\_ NO \_\_\_

*IF YES, how much do you pay and for what?*

**E.** Do you pay any expenses for your dependent children under the age of 18 to attend a private or public school (not college)? YES \_\_\_ NO \_\_\_

*IF YES, how much, for who, and where do they go to school?*

**28. Anything else?**

Are there any other debts, potential debts, assets, potential assets, or anything else related to your financial situation that we haven't discussed already? If so, let us know:

# Monthly Profit & Loss Template

For Self-Employment, Small Business, Home Business, "Gig" Work

*Please provide 6 months of information  
(even if you had no income or expenses in a month)*

Name of Business (if any): \_\_\_\_\_

Type of Business: \_\_\_\_\_

Who owns the business? \_\_\_\_\_

When did you first start this business? \_\_\_\_\_

Today's Date: \_\_\_\_\_

	Month:	Month:	Month:	Month:	Month:	Month:
<b>A. Gross Income</b> <i>(total amount people paid you for your products or services)</i>						
<b>B. Total Expenses</b> <i>(expenses necessary to make what you sell or provide the service you sell)</i>						
<b>C. Total Profit or Loss</b> <i>(subtract B from A)</i>						