

Bankruptcy Questionnaire

Bankruptcy is a right provided by law to people who are deeply in debt and in need of a fresh start. Bankruptcy will discharge many of your debts and you will not have to pay them, except, in some cases, secured debts for the purchase of particular merchandise or debts on which you gave a mortgage or put up other property as collateral. The law allows you to keep some money and some types of necessary property in bankruptcy. To receive this protection, it is necessary that you list all items asked for in the following questions: if you do not list an item, that item will not be protected in bankruptcy. You must also list *everyone* to whom you owe money. If you leave out one of your creditors, you may have to pay the money to that creditor or you may lose your right to bankruptcy. It may also be considered a crime if you intentionally give false information or leave out information. If you have any questions about whether you can keep certain property or whether you should list a debt, write that question down and remember to ask the lawyer. We know this questionnaire is long. Preparing your bankruptcy papers properly takes a lot of time and a lot of information. If we work together on this, we can protect your family from great hardship and give you the new start the law intends you to have.

There is a filing fee of \$306.00 which must be paid to the court in chapter 7 cases (\$281.00 if your case is filed under chapter 13). This is included in the fee quoted by our office.

You must also receive budget and **Credit Counseling** from an approved credit counseling agency **before your case is filed**. It is a good idea for you to meet with us before you receive the credit counseling. We can provide you with a list of approved credit counseling agencies. You should fill out this questionnaire before meeting with the credit counseling agency and refer to it as needed. After your case is filed, you will need to attend a meeting with the bankruptcy trustee and you may have to appear at a court hearing. **Before the court will give you a discharge, you must also complete an approved course in personal finances (Debtor Education)**. This course will take approximately two hours to complete. We will give you a list of organizations that provide approved courses. You should sign up for the course soon after your case is filed.

(1) Fill out *every* question on all of the pages. Wherever you are given a choice of YES or NO on these forms, check either YES or NO, whichever is correct. Please fill out these pages as well as you can. We will help with any questions you don't understand.

(2) Write clearly or typewrite your answers. We *must* be able to read them.

(3) Wherever the name of a person or firm is asked for, give the *full address*. *Make the address accurate*. Your discharge from each debt depends upon your giving a complete and correct address. Please include copies of any

correspondence received within the last 60 days from any creditors. If you receive any correspondence from your creditors before your final signing appointment, please bring the correspondence to your appointment.

(4) If you do not know the exact amount you owe, fill in a *HIGH* estimate. Do *not* leave the amount blank and do not say “don’t know.”

(5) Wherever you need more room, turn the page over and put the information on the back together with the number of the question.

(6) List *every creditor and everybody* that has had anything to do with your debts, including cosigners. Please include accurate account numbers. If a bill you owe has been sent to a collection agency or any attorney, list *both* the person you originally owed *and* the collection agency or any attorney, giving the *full* address of each. If the collection agency has an attorney, list the person you originally owed, the collection agency, and the attorney, giving the full address of each.

(7) Whenever a question asks you to be prepared to give details, gather all papers concerning the matter, including bills and collection letters, and bring them with you when you return this form. In any event, be sure to bring with you the following items (unless they don’t apply to you):

- (a) Picture identification card and Social Security card or other document containing your social security number;
- (b) Deeds and mortgages on your house or other real estate;
- (c) Any insurance policies;
- (d) Any papers relating to past bankruptcies and Wage Earner Plans (Chapter 13);
- (e) Copies of tax returns for past two years, and copies of your pay check stubs for the last six months (and you should keep all pay stubs you receive while your bankruptcy case is pending);
- (f) Copies of your last six bank statements and copies of statements from any other deposit accounts, such as a credit union or brokerage account, including IRAs, 401(k)s, and other pension accounts (and you should continue to keep the bank statements you receive after your case is filed and while any part of your case is pending as we may need to provide it to the trustee);
- (g) Legal papers, lawsuits, eviction notices, divorce papers, separation agreements, alimony orders, and child support orders;
- (h) Any appraisals or tax assessment papers;
- (i) Any other papers you have concerning any of your debts; and
- (j) Any lease or installment sale (“lease purchase” or “rent-to-own”) agreements for housing (apartment, house, mobile home) or other property (cars, televisions, etc.) that you have signed and that are still in effect or not fully paid.

Complete All Questions. If you and your spouse are not living together, and there is no possibility that your spouse will file bankruptcy along with you, you don't have to answer the questions about your spouse.

Name: _____
Spouses Name: _____
Social Security Number(s) Husband _____ Wife _____
Current Address and dates you have resided there: _____

Mailing Address is different from Current Address: _____

Telephone Numbers: _____

Email Address: _____

If you have lived at more than one address in the last two and one half years, please list all of the addresses and the dates you lived at each address:

Marital Status: _____

Have you ever filed for Bankruptcy Protection? ? YES ____ NO ____

If Yes, when did you file? _____

Where did you file? _____

How many rooms are in your home or apartment?

Living room(s) _____ Great room(s) _____

Family room(s) _____ Florida room(s) _____

Bedroom(s) _____ Bathroom(s) _____

Kitchen _____ Laundry _____

How many square feet is your home or apartment? _____

If you own a home you reside in, when was it purchased? _____

If the home was purchased within the last 10 years, did you make a down payment? _____ How much? _____

What was the source of the funds? _____

Have you made any lump sum payments toward the home? _____

If so, how much? _____

When? _____

What was the source of funds? _____

Are you current on your payments? _____

If you are not current, how many payments do you owe? _____

When was your last payment made? _____

What is the amount of your payment? _____

Please complete the following information about the mortgages on your property:

1st Mortgage

Name of Creditor: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

When was your last payment made? _____

What is the amount of your payment? _____

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes
If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? ___ No

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

2nd Mortgage

Name of Creditor _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

When was your last payment made? _____

What is the amount of your payment? _____

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? _____ No _____ Yes
If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

Homeowners Association

Name of Creditor _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

When was your last payment made? _____

What is the amount of your payment? _____

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt?

_____ No _____ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

Have you been accused of any of the following in a civil or criminal action which may be filed, remains pending, or has been decided against you?

Any violation of the securities laws? _____ Yes _____ No

Driving including an auto, vessel or aircraft under the influence of alcohol or drugs?

_____ Yes _____ No

A Felony? _____ Yes _____ No

Embezzlement? _____ Yes _____ No

An intentional tort? (Assault, Libel, Slander) _____ Yes _____ No

A willful or reckless act that causes serious physical injury or death?

_____ Yes _____ No

If you are married, do you intend for your spouse to file bankruptcy with you?

_____ Yes _____ No

Make sure you have listed all income received in the last six months by you and your spouse on your means test worksheet:

(Bring a copy with you to our office of all pay stubs or other records from your employer of all pay received for the last six months.)

List all income received so far this year and in the last two years by you or your spouse:

(Give gross income as employers or specify social security, (Self or reported on tax returns) welfare, unemployment, spouse self-employment, investments, etc.)

Husband	Source	Address	Amount
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So far this year: _____

Last year: _____

Year before last: _____

Wife Source Address Amount

So far this year: _____

Last year: _____

Year before last: _____

If you employed anyone (such as regular employees, cleaning people, gardeners, babysitters), do you still owe them wages? YES ___ NO ___. If YES, give name and address of employee, dates worked, amount owed, and work done. _____

Has anyone given you money to purchase property or services that you were unable to provide? YES ___ NO ___. If YES, give details: _____

Have you ever been on welfare within the past two years? YES ___ NO ___. Has anyone in your immediate family? YES ___ NO ___. If YES to either question, specify the persons, dates, amounts received, and places (if state welfare, name the state, if local welfare, name the city or county).

Have you ever received or been told you have received more money from the government than you were supposed to (such as social security, welfare, unemployment compensation, food stamps, etc.)? YES _____ NO _____
If YES give details: _____

Do you have any vacation time that is due you from your employer? YES _____ NO _____. If YES, how much is due? _____

Do you have an IRA (including Roth or education IRA) or any other pension plan? YES ___ NO _____. If YES, give details: _____

Have you paid or contributed any funds to a tax-exempt tuition program, or purchased any tuition credits or certificates? YES _____ NO _____. If YES, give details: _____

Are you the beneficiary of a trust or future interest? YES ___ NO ___. If YES, give details: _____

Do you expect to receive more than a small amount of money or property at any time in the near future by way of gift or life insurance proceeds? YES ___ NO ___. If YES, give details: _____

Taxes: (Bring a copy of your W-2 forms and any tax returns you have filed within the past year with you to our office.)

A. Have you received any tax refunds this year? YES ___ NO ___.
State \$ _____ Federal \$ _____

B. What income tax refunds do you expect to receive this year?
State \$ _____ Federal \$ _____

C. Does this amount include an Earned Income Credit? YES _____ NO _____.

D. Have you already filed for the refund? YES _____ NO _____.

E. When do you expect to receive the tax refund? _____

F. Do you know if anyone intends to take or intercept your tax refund? YES ___ NO ___. If YES, give details. _____

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

Do you anticipate receiving a tax refund next year? _____

How much do you typically receive as a refund? _____

Do you anticipate more or less than your typical refund amount next year? _____

H. (1) Is any other person (such as your spouse) entitled to part of your refund?
YES ___ NO _____.

(2) Have you filed income tax returns every year for the last seven years?
YES ___ NO _____.

(3) Do you have copies of your income tax returns filed in the last four years?
YES ___ NO _____. If NO, state the years for which you do not have copies:

(4) Do you owe any taxes to the United States? YES ___ NO ___. If YES, give the name and address of the department or agency to which the tax is owing, the kind of tax that is owing, and the years for which the tax is owing: _____

(5) Do you owe any taxes to any states? YES _____ NO _____. If YES, give the name of the state and the department or agency therein, the address of the department or agency, the kind of tax that is owing, and the years for which the tax is owing: _____

(6) Do you owe any taxes to a county, district, or city? YES _____ NO _____. If YES, give the name of the county, district, or city, the kind of tax that is owing, and the years for which the tax is owing: _____

(7) 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 were in business], or money owed Small Business Administration)? YES _____ NO _____. If YES, give the name of the branch, its address, the amount owing, and why it is owed: _____

Name of Creditor: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

For secured creditors provide the following:

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___

If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

(1) Have you ever had a student loan or cosigned for someone else's student loan? YES ___ NO ___. If YES to either question, please state:

(2) Who lent you the money? _____

(3) What school was the loan for? _____

(4) Did the student finish the course of study at the school? YES _____

NO _____. If NO, why not? _____

(6) Who is trying to collect the debt? _____

(7) How much have you paid on the debt (include any tax refund intercepts)? _____

(8) Has anyone else made payments on the debt? YES ___ NO _____. How much? \$_____

Name of Creditor: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___

If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? ___ No ___ Yes

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

Suits: (Bring in all papers relating to any suits or criminal cases.)

A. Have you ever been sued by any person, company, or organization? YES ____
NO _____. If YES, state:

<i>Case Name</i>	<i>Case No.</i>	<i>Name and Address Of Court</i>	<i>Type of Case</i>	<i>Result of Case</i>
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B. Have any court suits resulted in a judgment or a lien being placed on your property? YES ____ NO _____. If YES, state:

<i>Case Name</i>	<i>Case No.</i>	<i>Name and Address Of Court</i>	<i>Type of Case</i>	<i>Result of Case</i>
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C. Have you ever sued any person, company, or organization? YES ____
NO _____. If yes, state:

<i>Case Name</i>	<i>Case No.</i>	<i>Name and Address of Court</i>	<i>Type of Case</i>	<i>Result of Case</i>
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D. Do you have any criminal charges or convictions? YES ____ NO _____. If yes, state:

Case Number; Name of Court; Charges; Result of Case; Do You Owe Fines, Restitution, or Any Other Money?

E. Have you been involved in any administrative agency cases (unemployment compensation, worker's compensation, etc.) in the past 12 months? YES ____
NO _____. If yes, state:

<i>Case Name</i>	<i>Case No.</i>	<i>Agency's Name & Address</i>	<i>Type of Case</i>	<i>Result of Case</i>
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F. Do you have any possible reason for suing someone for damage to your property or for injuries to yourself or other members of your family? YES _____ NO _____. If YES, who could you sue, how much money is involved, and why could you sue? _____

Garnishment, Attachment, and Sheriff's Sale:

A. Have you ever had any property listed for or sold at a foreclosure, tax sale, or sheriff's sale, or levied upon? YES _____ NO _____. If YES, bring any papers concerning those actions to the office and state:

<i>What Property Was Sold Or Listed for Sale</i>	<i>Value of Property</i>	<i>Date</i>	<i>Name and Address of Creditor</i>
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B. Has money from your pay check or bank account been garnished, or taken or frozen by a creditor, including your bank or credit union, because of a debt? YES _____ NO _____. If YES, give the following:

<i>Name and Address of Creditor Who Received the Money</i>	<i>Amount Taken</i>	<i>Dates</i>
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Repossessions and Returns:

A. Have you had any property or merchandise repossessed during the last year? YES _____ NO _____. If YES, bring all papers including all letters telling you of the repossession or sale.

<i>Description of Value of Property Property Repossessed</i>	<i>Month & Year of Repossession</i>	<i>Who Repossessed Item (Name and Address)</i>
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B. Have you voluntarily returned any property or merchandise to the seller in the past year? YES _____ NO _____. If YES, state:

<i>Description of Property</i>	<i>Month & Year of Return to Seller</i>	<i>Seller's Name Address</i>	<i>Value of Property at Time of Return</i>
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Property of Yours Held by Someone Else:

A. Does any other person have any of your property? (This includes any check you may have given to a payday lender or check cashing service.) YES _____ NO _____. If YES, list the following:

<i>Type of Property</i>	<i>Value</i>	<i>Being Held By (Name and Address)</i>	<i>Why Is This Person Holding the Property?</i>
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B. Have you given or made an assignment of any of your property for the benefit of your creditors or any settlements with your creditors within the past two years? YES _____ NO _____. If YES, give the name and address of the creditor and the terms and conditions under which you gave the property to the creditor or made an agreement with the creditor: _____

C. Is any of your property in the hands of a court-appointed person (a receiver), or in the hands of a person who is holding it for your benefit and use (a trustee)? If YES, give details: _____

D. Is any of your property in the possession of a pawnbroker, storage company or repairman? YES _____ NO _____. If YES, describe and give its value: _____

Gifts and Transfers:

A. Have you made sales of real property, personal property, mortgages, gifts, or transfers of any substantial property or cash within the last four years? YES _____ NO _____. If YES, give the following:

<i>Name of Person Who Received Property.</i>	<i>Description of Property of Gift or Sale</i>	<i>Month and Year</i>	<i>Was Sale or Gift to a Relative?</i>
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B. Have you used any money from the sale or transfer of any property within the past ten years to purchase or improve your current home, or to pay down the mortgage? YES _____ NO _____. If YES, give the following:

<i>Description of Property Sold or Transferred</i>	<i>Month and Year of Sale or Transfer</i>	<i>Amount You Got from Sale or Transfer</i>	<i>How Much of this Was Used to Buy or Improve Your Home?</i>
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Losses:

A. Did you lose any substantial amount of money as a result of fire, theft, or gambling during the last year? YES _____ NO _____. If YES, state the following:

<i>What Caused the Loss?</i>	<i>Value of the Money or Property That Was Lost</i>	<i>Date of the Loss</i>
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B. Did insurance pay for any part of the loss? YES ___ NO ___. If YES, what was date of payment? _____ How much was paid? \$_____

Payments or Transfers to Attorney or Debt Consultants:

A. Give the date, name, and address of any attorney or bankruptcy consultant (petition preparer, typing service, document preparation service, independent paralegal) you have consulted during the past year:

B. Give the reason for which you consulted the attorney or bankruptcy consultant: _____

C. How much have you paid the attorney or bankruptcy consultant? \$ _____

D. Did you promise to pay money to the attorney or bankruptcy consultant? YES
_____ NO _____. If YES, give the amount and terms of the agreement: _____

E. Give the name and address of any credit counseling agency or debt
settlement company you have consulted during the past year and the date when
you consulted them: _____

F. Did the agency have you sign up for a plan to repay or settle your debts? YES
_____ NO _____. If YES, give the amount and terms of the plan (*and bring a
copy of the plan with you to our office*):

G. How much have you paid the agency or company? \$ _____

H. Have you consulted anyone else about your debts in the past year?
YES _____ NO _____. If YES, give name, address, and amount(s) paid for the
service: _____

I. Did any of your debts result from a refinancing or a consolidation loan?
YES ___ NO ___. If YES, which ones? _____

Please be sure to bring all papers for these loans with you.

Closed Bank Accounts:

Have you or your spouse had your name on any bank account (such as savings,
checking, certificates of deposit) during the past 12 months that is now closed?
YES ___ NO ___. If YES, state:

<i>Bank's Name and Address</i>	<i>Acct. No.</i>	<i>Type of Account (Savings/Checking)</i>	<i>Names of Others on the account</i>	<i>Date Closed</i>	<i>Final Balance</i>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Safe Deposit Boxes:

Have you or your spouse had a safe deposit box during the last year?

YES _____ NO _____.

If YES, list the name and address of the bank, the name and address of everyone who had access to the box, the contents of the box and, if you no longer have the box, the date it was closed:

Property Held for Another Person: Do you have any money, property, furniture, etc. that belongs to another person or that you are holding for the benefit of someone else (in trust)? YES ____ NO _____. If YES, what is the property, who owns it, and what is it worth? Include name and address of the owners:

<i>Type of Property</i>	<i>Value</i>	<i>Owned By</i>	<i>Address</i>	<i>Relative? (Yes or No)</i>

At what address are you keeping this property? _____

Leases: Have you had an auto lease, rent-to-own, or rental-purchase transaction in the past four years?

YES _____ NO _____. If YES, give details: _____

Cooperatives: Are you a member of any type of cooperative (housing, food, agricultural, etc.)? If YES, give details: _____

Alimony, Child Support, and Property Settlements:

A. Have you had any previous marriages? YES ___ NO ___. If YES, what is the name of your former spouse? _____

Please be sure that any debts from prior marriages which were never paid are listed with your other debts.

B. Does anybody owe you any money or child support? YES _____ NO _____. Who? _____ How much? \$ _____

C. Have you ever been ordered to pay child support? YES ____ NO ____.
D. Do you have children that do not live with you, but you have not been ordered to pay support? YES ____ NO ____.

Alimony? YES ____ NO ____.

Property Settlement? YES ____ NO ____.

If yes to any question, state:

(1) To whom do you make the payments? _____

(2) Are you behind in your payments? _____

(3) Are the persons you are required to support presently on welfare or have they been on welfare or other public assistance? _____

(4) Do you have any family court hearings coming up? If YES, explain and give dates: _____

D. Do you expect to be involved in a property settlement with your spouse or former spouse in the near future? _____

Accidents and Driver's License:

A. Have you been involved in a vehicle accident in the last four years?

YES ____ NO ____.

B. Has your vehicle been involved in an accident in the last four years?

YES ____ NO ____.

C. Have your children ever injured anyone else or their property?

YES ____ NO ____.

D. Have you ever lost your driver's license? YES ____ NO ____ . If YES, give details: _____

Cosigners and Debts Incurred for Other People:

A. Were there any cosigners for you on any of the debts you have listed in these forms? YES ____ NO ____ . If YES, give the cosigner's name and address, and which debts were cosigned: _____

B. Have you ever been the cosigner on someone else's loan or debt which hasn't been paid off?

YES ____ NO _____. If YES, list the following for each debt:

<i>Creditor's Name and Address</i>	<i>Date of Debt</i>	<i>Amount Owing</i>	<i>Name and Address of Person You Cosigned For</i>
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C. Have you borrowed any money for someone else's benefit? YES ____ NO _____. If YES, list the following unless you are sure that loan or debt has been paid:

<i>Creditor's Name and Address</i>	<i>Collection Agent or Attorneys</i>	<i>Date of Debt and Which Spouse Owes</i>	<i>For What</i>	<i>Current Amount of Claim</i>
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D. If you put up any of your property as collateral on a debt you cosigned, list the following:

<i>Creditor</i>	<i>Type of Property</i>	<i>How Much the Property Is Worth Now</i>
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Credit Card and Finance Company Debts:

A. Have you obtained cash advances of more than \$750 in the last seventy days or used any credit card to purchase more than \$500 worth of goods or services in the last ninety days? YES ____ NO _____. If YES, give details: _____

B. Have you ever gone over your credit limit on any credit cards? YES ____ NO _____. If YES, give details: _____

C. If any of your debts listed on this form are owed to finance companies, did you sign an agreement that listed some of your property (such as a second television

or VCR) and stated that the property would be security or collateral for the loan?
YES ____ NO _____. If YES, which ones? _____

D. Do you owe money on a payday loan, auto title loan, or for a check cashing service? YES ___ NO _____. If YES, give details: _____

Evictions:

A. Has your current landlord sued you or brought an eviction suit against you?
YES ___ NO _____. If YES, state:

<i>Case Name</i>	<i>Case No.</i>	<i>Name and Address of Court or Eviction</i>	<i>Reason for Suit</i>	<i>Result of Case (Eviction or Judgment?) or Date of Hearing</i>
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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, list the following:

Regular Rent Payment When Are Rent Payments Due? Back Rent You Owe (Specify Monthly, Weekly, Other)

C. Is your landlord planning to bring an eviction suit against you? YES ____ NO _____. If YES, give details and state if your landlord is claiming that you have damaged the property or used illegal drugs on the property: _____

CREDITORS

(1) Type of Creditor: _____
Name: _____
Address: _____

Account # _____
What is Debt for? _____
Total amount of outstanding debt? _____
For secured creditors provide the following:
Description of Collateral _____
Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____
Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? ___ No ___ Yes If yes provide the following:

Name: _____
Address: _____

Relationship: _____

(2) Type of Creditor: _____
Name: _____
Address: _____

Account # _____
What is Debt for? _____
Total amount of outstanding debt? _____
For secured creditors provide the following:
Description of Collateral _____
Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last
year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? _____ No _____ Yes
If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? ___ No ___ Yes, If yes provide the
following:

Name: _____

Address: _____

Relationship: _____

(3) Type of Creditor: _____

Name: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

For secured creditors provide the following:

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide
the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last
year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes
provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No ___ Yes If yes provide the
following:

Name: _____

Address: _____

Relationship: _____

(4) Type of Creditor: _____

Name: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

For secured creditors provide the following:

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No ___ Yes

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

(5) Type of Creditor: _____

Name: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

For secured creditors provide the following:

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last
year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes
provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

(6) Type of Creditor: _____

Name: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

For secured creditors provide the following:

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide
the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last
year? ___ No ___ If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? _____ No _____ Yes,
If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No _____ Yes, If yes provide
the following:

Name: _____

Address: _____

Relationship: _____

(7) Type of Creditor: _____
Name: _____
Address: _____

Account # _____
What is Debt for? _____
Total amount of outstanding debt? _____
For secured creditors provide the following:
Description of Collateral _____
Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:
Name: _____
Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? _____ No _____ Yes,
If Yes provide this office with a copy of the lawsuit.
If anyone else responsible for this debt? ___ No _____ Yes, If yes provide the following:
Name: _____
Address: _____

Relationship: _____

(8) Type of Creditor: _____
Name: _____
Address: _____

Account # _____
What is Debt for? _____
Total amount of outstanding debt? _____
For secured creditors provide the following:
Description of Collateral _____
Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:
Name: _____
Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___

If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ____ No ____ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ____ No ____ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? ____ No ____ Yes

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

(9) Type of Creditor: _____

Name: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

For secured creditors provide the following:

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ____ No ____ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ____ No ____ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? ____ No ____ Yes

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

(10) Type of Creditor: _____

Name: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

For secured creditors provide the following:

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? ___ No ___ Yes, If yes provide the following:

Name: _____

Address: _____

Relationship: _____

Now review all the debts you have listed on this page and the last few pages listing your creditors. Have you forgotten any?

DOUBLE-CHECKING FOR OTHER POSSIBLE DEBTS

CREDIT UNIONS..	Yes	No	Do you have any loans with a credit union?
TIMESHARES..	Yes	No	Do you have a timeshare?
CAMPGROUNDS..	Yes	No	What about campground memberships?
LEASES..	Yes	No	Do you have any leases on motor vehicles, buildings or equipment?
SPA MEMBERSHIPS..	Yes	No	What about spa or exercise club membership?

MEDICAL BILLS..	Yes	No	How about medical bills that might not get paid by insurance?
EX SPOUSES..	Yes	No	Does your ex-spouse have any claims against you, for instance a claim of equitable distribution?
STORE ACCOUNTS..	Yes	No	Do you owe any money on a store account?
BANK OVERDRAFT..	Yes	No	Do you have any overdraft protection (check protection) debts?
FURNITURE..	Yes	No	Do you owe money on the purchase of furniture?
DEBTS TAKEN OVER..	Yes	No	Is you name on the debt taken over by an ex-spouse or friend, such as a credit card or house loan?
ASSUMED DEBTS..	Yes	No	Is your name still on a debt taken over by someone else? That is, a debt where someone assumed your loan or simply took over your payments?
CREDIT REPORT..	Yes	No	Is it possible that there are any other debts listed on your credit report?
RETURNED ITEMS..	Yes	No	Did you return to a creditor something you bought thinking that the balance would be cancelled?
OLD REPOSSESSIONS..	Yes	No	Were there any repossessions or foreclosures in the past that might lead to deficiency claims against you?
FHA OR VA.. GUARANTEES	Yes	No	Was a house or mobile home you lost covered by a loan guaranteed by FHA or VA?
CREDIT CARDS..	Yes	No	Did you list all credit cards?
CO-SIGNERS..	Yes	No	Did you happen to co-sign or guarantee a loan for someone else?

	Yes	No	Did anyone co-sign or guarantee on a debt for you? Note: Do not include your spouse, if your spouse is filing bankruptcy with you.
CAR ACCIDENTS..	Yes	No	Do you have any claims against you because of a car accident?
CONTINGENT.. OBLIGATIONS	Yes	No	Do you have some contract or obligation such that if something does not work out right, you will owe some money?
TAXES..	Yes	No	Do you owe any taxes?
	Yes	No	Are there any tax returns you did not file that you were supposed to?
	Yes	No	If so, will you owe any taxes on those tax returns?
AAFES, ESPRIT, AER RED CROSS..	Yes	No	Do you owe any money through any of these military related organizations?
SOCIAL SECURITY	Yes	No	Are you being billed for any overpayments by the Social Security Administration?
	Yes	No	Have you received an overpayment by the Social Security Administration?
MILITARY OVERPAYEMNT..	Yes	No	Do you owe money to the Department of Defense or other government agency for overpayments regarding your service in the military? Note: If you are still in the military or are receiving military disability, you cannot get rid of your obligation to pay back "advance" pay that you received.
PAY-DAY LOANS..	Yes	No	Do you have any unpaid pay-day loans? Note: These loans are dischargeable in bankruptcy. If you have one or more of these, let us know whether you gave a post-dated check or whether you gave

the pay-day lender authorization to take money out of your bank account.

LIFE INSURANCE..	Yes	No	Do you own any "cash value" life insurance? That is, do you own any life insurance that you could cash in while you are still alive, if you wanted to? Note: This does NOT include what is called "term" life insurance.
INHERITANCE.. OR "HEIR" PROPERTY	Yes	No	Do you have a right to an inheritance or some "heir" property because someone died?
401K LOANS..	Yes	No	Do you have any 401K Loans to repay?
UTILITY, CABLE TV TELEPHONE	Yes	No	Do you owe any defaulted utilities or cable bills?
STUDENT LOANS	Yes	No	Do you owe any student loan company?
TRAFFIC TICKETS RESTITUTION	Yes	No	Do you owe any traffic tickets or criminal restitution?
RELATIVES	Yes	No	Have you borrowed any money from a relative that you have not repaid?

ASSET LISTING:

(If you are married and living with your spouse, designate any items listed below that are not jointly owned.)

A. REAL PROPERTY (Home):

(1) Do you own real estate that you use as your home? YES _____ NO _____.

Describe and give the location of this property (house, mobile home, condominium, cooperative, land, etc.) in which you hold an interest: _____

(2) Co-owners: _____

(3) Purchase price: _____ Date purchased: _____

(4) Original mortgage amount: _____

Down payment amount: _____

(5) Have you used any funds that you did not borrow to purchase or improve your home? YES ___ NO ___. If YES, list the amounts and give details: _____

(6) If not purchased, state when and how you became the owner (inheritance, gift, etc.): _____

(7) Present value of your house: _____

(8) Outstanding mortgage balance: _____

(9) Are there any other mortgages? YES _____ NO _____. If YES, give the name and address of each company: _____

(10) Is any mortgage insured by the FHA, VA, or a private mortgage insurance company? YES _____ NO _____. If YES, give details: _____

B. REAL PROPERTY (Other Real Estate):

(1) Do you own other real estate? YES _____ NO _____. Describe and give the location of all real property (lot, house, condominium, cooperative, land, burial plot, etc.) in which you hold an interest:

(2) Co-owners: _____

(3) Outstanding mortgage balance: _____

(4) Name of mortgage company: _____

(5) Purchase price: Year purchased: _____

(6) Present value of your house: _____

(7) Are there any other mortgages? YES ___ NO ___. If YES, give the name and address of each company:

(8) Is any mortgage insured by the FHA, VA, or a private mortgage insurance company? YES _____ NO _____. If YES, give details: _____

C. PERSONAL PROPERTY:

(1) Cash on hand: \$ _____

(2) Do you have any deposits of money in banks, savings and loan associations, or credit unions? If YES, list the name and address of the bank, savings and loan

association, or credit union, and the amount:

Name/Address	Type of Account	Amount in Account
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(2a) Have you or your spouse had your name on any family member's bank accounts (savings, checking, certificates of deposit).

Name/Address	Name of Joint Account Holder	Type of Account	Amount in Account
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(3) Have you given a security deposit to any landlord, utility, or anyone else? YES ___ NO _____. If YES, list the name and address of the person or company and the amount: _____

(4) List your major property items such as stove, refrigerator, TV, sewing machine, furniture, guns, etc., giving approximate age and value (what you could get for it if you sold it). (These goods usually can be protected, but you must list them to protect them.)

<i>Item</i>	<i>Approximate Age</i>	<i>Value (What You Could Get for It If You Sold It)</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please photograph each room in your home with its contents. Please take as many photographs as necessary to show all items of property listed in each room.

If any of the above items are being financed through a company, list the item and the name and address of the company below: _____

(5) Give an estimate of the value (what you could get for it if you sold it) of the following:

All your furniture not already listed: \$_____

All your clothing: \$_____

All minor appliances not already listed: \$_____

All your household goods not already listed (dishes, utensils, etc.): \$_____

(6) List each item of jewelry that you own, and an estimate of its value (what you could get for it if you sold it): _____

PERSONAL PROPERTY

<u>QUANTITY</u>	<u>QUANTITY</u>	<u>QUANTITY</u>
LIVING/FAMILY ROOM	BEDROOMS	AUDIO
_____ COUCHES	_____ BEDS	_____ T.V.
_____ CHAIRS	_____ DRESSERS	_____ V.C.R.
_____ TABLES	_____ NIGHTSTANDS	_____ D.V.D.
_____ LAMPS	_____ LAMPS	_____ STEREO
_____ CLOCK	_____ CLOCK	
DINING ROOM	KITCHEN	
_____ TABLE	_____ REFRIGERATOR	
_____ CHAIRS	_____ STOVE	
_____ HUTCH/CABINETS	_____ MICROWAVE	
	_____ APPLIANCES	
UTILITY ROOM		
_____ WASHER		
_____ DRYER		

TOTAL VALUE _____

Have you financed any of your household furniture? If so list the creditor below.

Name of Creditor: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? _____ No _____ Yes,
If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No

If yes provide the following:

Name: _____

Address: _____

Relationship: _____

FIREARMS, SPORT, PHOTOGRAPHIC AND OTHER HOBBY EQUIPMENT

_____ PISTOLS

_____ CAMERA

_____ BICYCLES

_____ RIFLES

_____ VIDEO EQP.

_____ GOLF CLUBS

_____ SHOTGUNS

_____ WEIGHTS

_____ RACQUETS

TOTAL VALUE _____

D. CARS, MOBILE HOMES, TRAILERS AND BOATS:

Do you have any cars, trucks, mobile homes, boats, trailers, or motorcycles?
YES _____ NO _____. If YES, give the

Year	Make	Model	Value	Who is financing it	Amount owed
------	------	-------	-------	---------------------	-------------

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

Name of Creditor: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

When was your last payment made? _____

What is the amount of your payment? _____

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? ___ No ___ Yes If yes provide the following:

Name: _____

Address: _____

Relationship: _____

Name of Creditor: _____

Address: _____

Account # _____

What is Debt for? _____

Total amount of outstanding debt? _____

Description of Collateral _____

Market Value: \$ _____

Has this debt been assigned to a collection agent or attorney, etc.? If so provide the following:

Name: _____

Address: _____

Has creditor REPOSSESSED OR FORECLOSED on Property? YES ___ NO ___
If yes, provide the date, description of property and value _____

Has creditor ATTACHED, GARNISHED OR SEIZED property within the last year? ___ No ___ Yes If yes, provide date, description of property & value _____

Has creditor filed a lawsuit against you for this debt? ___ No ___ Yes, If Yes provide this office with a copy of the lawsuit.

If anyone else responsible for this debt? _____ No ___ Yes If yes provide the following:

Name: _____

Address: _____

Relationship: _____

E. OTHER PROPERTY: Do you own any life insurance policies?

YES _____ NO _____.

If YES, list insurance company's name and address: _____

How long have you had each policy? _____

Cash surrender value: _____

Do you have any other insurance, including credit insurance? YES _____

NO _____. If YES, describe: _____

Do you expect to receive any money from any insurance in the near future?

YES _____ NO _____. If YES, give details: _____

Do you own any stocks? YES _____ NO _____. Value: \$ _____

Do you own any bonds (including U.S. Savings Bonds)? YES _____ NO _____. Value: \$ _____

Do you own any machinery, tools, or fixtures used in your business or work?

YES _____ NO _____. If YES, list and state what you could sell it for: _____

Do you have any animals or pets? YES _____ NO _____. If YES, describe and give value (what you could sell them for): _____

Do you have any right to receive commissions or other payments from any previous job you have held? YES _____ NO _____. Does anyone owe you any money? YES _____ NO _____. If YES to either, state names, addresses and amounts owed: _____

Do you have any books, prints or pictures, stamps or coins, or sports equipment of substantial value? YES _____ NO _____. If YES, describe and estimate their value: _____

Do you have any stock in trade (inventory)? YES ____ NO ____ . If YES, describe and estimate the value: _____

Do you own anything else not mentioned above? YES ____ NO ____ . If YES, describe and state its value (what you could sell it for): _____

Does any of the property that you own or possess pose a threat of harm to public health or safety? YES ____ NO ____ .

Is the threat imminent? YES ____ NO ____ .

Has anyone ever alleged that any of the property that you own or possess poses a threat of imminent harm to public health or safety? YES ____ NO ____ .

Was the threat alleged to be imminent? YES ____ NO ____ .

Give details regarding any threat or alleged threat to public health or safety, including identification of property and nature of potential harm or alleged harm. _____

Budget Information:

A. Do you currently receive your pay or other income (check one):

	YOU	YOUR SPOUSE
WEEKLY	_____	_____
EVERY 2 WEEKS	_____	_____
MONTHLY	_____	_____
OTHER	_____	_____

B. What is the gross amount received in wages or other income (before taxes or other deductions)?

YOU	YOUR SPOUSE
_____	_____

C. What deductions, if any, are taken out?

	YOU	YOUR SPOUSE
Taxes	_____	_____
Insurance	_____	_____
Union dues	_____	_____
Other (identify: _____)	_____	_____

D. What is the usual amount of your check (take-home pay)?

YOU	YOUR SPOUSE
_____	_____

E. Is your job subject to seasonal or other changes?

YOU YES _____ NO _____
YOUR SPOUSE YES _____ NO _____

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

YOU _____
YOUR SPOUSE _____

G. If you receive alimony, maintenance, or support, what is the amount you get on a regular basis?

YOU _____
YOUR SPOUSE _____

H. List all dependents of you and your spouse.

	NAME	AGE	RELATIONSHIP
YOU	_____	_____	_____
	_____	_____	_____
YOUR SPOUSE	_____	_____	_____
	_____	_____	_____

I. List all members of your household.

NAME	AGE	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

J. Do you expect your income to increase or decrease more than 10% in the next year? YES _____ NO _____.

K. Do you expect to have any increase or decrease in expenses (like medical bills) in the near future? YES _____ NO _____. If YES, describe: _____

L. Do you, your spouse, or your dependents receive income from any source other than jobs, alimony, maintenance, or support listed above (such as public

assistance, unemployment compensation, social security, SSI, pension, etc.)?
 YES ____ NO _____. If YES, list:

<i>Source of Income</i>	<i>To Whom Payable</i>	<i>Amount per Month</i>
_____	_____	_____
_____	_____	_____

M. Do you, your spouse, or your dependents receive any regular contributions to your household expenses from any source not listed above? YES ____ NO _____. If YES, list:

<i>Source of Contribution</i>	<i>To Whom Payable</i>	<i>Amount per Month</i>
_____	_____	_____
_____	_____	_____

N. Is your family eligible for food stamps? YES ____ NO _____.
 If YES, how much in food stamps do you receive per month? \$ _____

O. Monthly Expenses. (Give realistic estimates. If your expenses add up to more than the income you have listed, or less than your income, be prepared to explain why.)

What are your average monthly expenses for (if you and your spouse are not filing bankruptcy together, list separately any regular monthly contribution your spouse makes to the following household expenses):

	<i>Average Monthly</i>	<i>Spouse's Expenses Contribution</i>
Rent or mortgage	_____	_____
1 st Mortgage	_____	_____
2 nd Mortgage	_____	_____
Are real estate taxes included?	Yes ____ No ____	
Is property insurance included?	Yes ____ No ____	
Condo or homeowners assn fees	_____	_____
Trash pickup	_____	_____
Electricity	_____	_____
Water	_____	_____
Telephone	_____	_____

Cellular Telephone	_____	_____
Other utilities (internet, cable T.V., etc.)	_____	_____
Home maintenance (repairs and upkeep)	_____	_____
Food (cash you spend on food)	_____	_____
Amount of food stamps you spend	_____	_____
Clothing	_____	_____
Laundry and cleaning	_____	_____
Medications	_____	_____
Other medical and dental expenses	_____	_____
Public transportation	_____	_____
Automobile upkeep	_____	_____
Gasoline and oil	_____	_____
Newspapers, magazines, school books	_____	_____
Recreation	_____	_____
Charitable contributions	_____	_____
Club and union dues (not deducted from wages)	_____	_____
Insurance (not deducted from wages)	_____	_____
Homeowner's or renter's Insurance	_____	_____
Life Insurance	_____	_____
Health Insurance (do not include if deducted from your pay check)	_____	_____

Auto Insurance _____

Other Insurance _____

Taxes (not deducted from wages or included in mortgage payment) _____

Other payments

Vehicle _____

Vehicle _____

Other – please describe _____

Other – please describe _____

Alimony, maintenance or support payments _____

Other payments for support of Dependents _____

Expenses for operating your business _____

Other expenses (list types of expenses) (e.g., home maintenance, security system, school) Identify: _____

P. Do you have any monthly expenses not listed above that you pay for the care and support of an elderly, chronically ill, or disabled member of your household or your immediate family? YES____ NO____. If YES, describe: _____

Q. Do you have any monthly expenses not listed above that you pay to keep your family safe from domestic violence? YES____ NO____. If YES, describe: _____

R. Do you pay any expenses for your dependent children under the age of eighteen to attend a private or public elementary or secondary school? YES____ NO____. If YES, describe: _____

MEANS TEST WORKSHEET

If your monthly income varies you will need to fill out one sheet for each month for a total of six months.

Month _____

List all sources of income:

NAME AND ADDRESS

Husband's main employer

Occupation: _____

Length of Employment: _____

How often are you paid?

YOU

WEEKLY _____ EVERY 2 WEEKS _____ MONTHLY _____ OTHER _____

What is the gross amount received in wages or income (before taxes or other deductions)?

1st paycheck _____

What Deduction, if any, are taken out?

Taxes _____

Insurance _____

Union dues _____

Other (identify: _____) _____

What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

2nd paycheck _____

What Deduction, if any, are taken out?

Taxes _____

Insurance _____

Union dues _____

Other (identify: _____) _____

What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

3rd paycheck _____

What Deduction, if any, are taken out?

Taxes _____

Insurance _____

Union dues _____
Other (identify: _____) _____
What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

4th paycheck _____
What Deduction, if any, are taken out?
Taxes _____
Insurance _____
Union dues _____
Other (identify: _____) _____
What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

5th paycheck _____
What Deduction, if any, are taken out?
Taxes _____
Insurance _____
Union dues _____
Other (identify: _____) _____
What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

6th paycheck _____
What Deduction, if any, are taken out?
Taxes _____
Insurance _____
Union dues _____
Other (identify: _____) _____
What is the usual amount of your check (take home pay)? _____

Did you receive income from any other source in this calendar month?
YOU _____ SPOUSE _____

Child Support or Alimony received	_____	_____
Social Security	_____	_____
Worker's Comp.	_____	_____
Rental Income	_____	_____
Income from business	_____	_____
Contributions to Support and other income	_____	_____

MEANS TEST WORKSHEET

If your monthly income varies you will need to fill out one sheet for each month for a total of six months.

Month _____

List all sources of income:

NAME AND ADDRESS

Wife's main employer

Occupation: _____

Length of Employment: _____

How often are you paid?

YOU

WEEKLY _____ EVERY 2 WEEKS _____ MONTHLY _____ OTHER _____

What is the gross amount received in wages or income (before taxes or other deductions)?

1st paycheck _____

What Deduction, if any, are taken out?

Taxes _____

Insurance _____

Union dues _____

Other (identify: _____) _____

What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

2nd paycheck _____

What Deduction, if any, are taken out?

Taxes _____

Insurance _____

Union dues _____

Other (identify: _____) _____

What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

3rd paycheck _____

What Deduction, if any, are taken out?

Taxes _____

Insurance _____

Union dues _____

Other (identify: _____) _____
What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

4th paycheck _____

What Deduction, if any, are taken out? _____

Taxes _____

Insurance _____

Union dues _____

Other (identify: _____) _____

What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

5th paycheck _____

What Deduction, if any, are taken out? _____

Taxes _____

Insurance _____

Union dues _____

Other (identify: _____) _____

What is the usual amount of your check (take home pay)? _____

What is the gross amount received in wages or income (before taxes or other deductions)?

6th paycheck _____

What Deduction, if any, are taken out? _____

Taxes _____

Insurance _____

Union dues _____

Other (identify: _____) _____

What is the usual amount of your check (take home pay)? _____

Did you receive income from any other source in this calendar month?

YOU _____ SPOUSE _____

Child Support or Alimony received _____

Social Security _____

Worker's Comp. _____

Rental Income _____

Income from business _____

Contributions to Support and _____

other income _____