

Bankruptcy Questionnaire

NAME: _____

ADDRESS: _____

COUNTY: _____

TELEPHONE NUMBERS: _____

SOCIAL SECURITY NUMBER: _____

Please complete this questionnaire in as much detail as possible. If a section does not apply to you, please write NA (not applicable) or none in the space provided.

LIST ALL OF YOUR REAL ESTATE, LAND, HOMES, MOBILE HOMES

Description and Location of Property, Home, Land, etc.	Current Market Value of Property	Amount of Mortgage (Total Balance Owed)
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_____	_____	_____
_____	_____	_____

What is your intention regarding the real property? reaffirm _____ surrender _____

LIST ALL OTHER ASSETS AND POSSESSIONS:

FOR EACH CATEGORY, GIVE A DESCRIPTION AND TODAY'S VALUE AS-IS IF APPLICABLE

- 1. Cash on Hand (amount in your wallet and/or pockets):** \$ _____
- 2. Bank accounts, checking, savings, or other financial accounts including CDs, shares in banks, credit unions, or brokerages:**
Name and Location of Bank
A.
B.

- C.
- D.

Account Numbers

- A.
- B.
- C.
- D.

Balance on Hand

- A.
- B.
- C.
- D.

Total of All Balances on Hand: \$ _____

3. Security deposits with landlords, utility companies, and others:

\$ _____

4. Household Goods: DESCRIBE THE HOUSEHOLD CONTENTS AND GIVE THE TOTAL VALUE BASED ON REPLACEMENT IN CURRENT CONDITION (NOT REPLACEMENT WITH NEW COST)

FURNITURE

Description:

Value: \$ _____

ELECTRONICS (TV, VCR, DVD, STERO, etc.)

Description:

Value: \$ _____

LINENS

Description:

Value: \$ _____

KITCHEN WARES

Description:

Value: \$ _____

- 5. Books, pictures, art objects, antiques, stamp/coin/record/tape/CD collections:**
Description:

Value: \$ _____

- 6. Clothing and wearing apparel:**
Description:

Value: \$ _____

- 7. Furs and jewelry (include wedding rings, if any):**
Description:

Value: \$ _____

- 8. Firearms, sports, photographic and other hobby equipment:**
Description:

Value: \$ _____

- 9. Cash value of life insurance and interests in insurance policies with cash or surrender value, such as whole life: Provide copy of the last statement.**
Insurance Company Name and Policy Number:

Cash or Surrender Value: \$ _____

- 10. Annuities paying income:**
Description:

Value: \$ _____

11. Interests in IRA, ERISA, KEOGH, or other retirement, pension/profit sharing plans, 401K plans:

Describe Plan (401K, Pension, IRA, etc.):

Value: \$ _____

12. Stocks or investments in companies, businesses, incorporated and unincorporated enterprises, etc.:

Description:

Value: \$ _____

13. Interests or investments in partnerships or joint ventures:

Description:

Value: \$ _____

14. Government and corporate bonds, other negotiable and non-negotiable instruments and investments:

Description:

Value: \$ _____

15. Money owed to you (by someone else), including accounts receivable:

Description:

Amount: \$ _____

16. Alimony, maintenance, and support owed to you:

Description:

Amount: \$ _____

17. Property settlements to which you (the debtor) may be entitled:

Description:

Amount: \$ _____

18. Other liquidated debts owed to you (the debtor), including tax refunds – include anyone that owes you money and money coming to you from others:
Description:

Amount: \$ _____

19. Equitable or future interests, life estates, trusts, and/or inheritances to which you are now entitled:
Description:

Value: \$ _____

20. Contingent and non-contingent interests in estates, death benefit plans, life insurance policies, and/or trusts:
Description:

Value: \$ _____

21. Patents, copyrights, and other intellectual property:
Description:

Value: \$ _____

22. Licenses, franchises, and other general intangibles:
Description:

Value: \$ _____

23. Automobiles, trucks, trailers, and accessories:

Make and Model: _____ Value: _____

Make and Model: _____ Value: _____

Make and Model: _____ Value: _____

Make and Model: _____ Value: _____

24. Boats, motors, other recreational vehicles, and accessories:

Make and Model: _____ Value: _____

Make and Model: _____ Value: _____

25. Aircraft and accessories:

Make and Model: _____ Value: _____

26. Office equipment, furnishings, and supplies:

Description:

Value: \$ _____

27. Machinery, fixtures, equipment, and supplies used in business, and tools of a trade or business:

Description:

Value: \$ _____

28. If you are suing anyone or have any claims or possible claims, list details:

Description:

Name and address of your attorney:

Value: \$ _____

29. Animals: Household pets and farm animals:

Description:

Value: \$ _____

30. Crops:

Description:

Value: \$ _____

31. Farming equipment and supplies:

Description:

Value: \$ _____

32. Farming chemicals and feed:

Description:

Value: \$ _____

33. Other property or assets of any kind not already listed:

Description:

Value: \$ _____

LEASE INFORMATION:

Name of Landlord:

Address:

Name of Vehicle Lessor:

Address:

CO-SIGNERS: DEBTS YOU HAVE CO-SIGNED OR SOMEONE CO-SIGNED FOR YOU

Name and Address of Co-signers or Co-debtors:

PERSONAL INFORMATION

Spouse's Name (if you are filing alone):
Spouse's Address (if you are filing alone):

Marital Status (please circle): Single Married Divorced Widowed Separated

Names and Ages of Minor (under age 18) Children:

Occupation:

Employer:

Address of Employer:

Length of Employment:

LIST YOUR HOUSEHOLD INCOME FROM ALL SOURCES – AVERAGE FROM THE PAST SIX MONTHS

Gross income: \$ _____ per _____ (week/month/etc.)

Net take home after deductions: \$ _____ per _____

Spouse – Gross income: \$ _____ per _____

Spouse – Net take home income after deductions: \$ _____ per _____

Other income in household: \$ _____ per _____

From what source(s)? _____
(support, social security, pension, part-time job, etc.)

Does anyone else pay your living expenses? If yes, how much per month? \$ _____

ABOVE SHOULD BE THE AVERAGE OF YOUR TOTAL HOUSEHOLD INCOME FROM THE PREVIOUS SIX MONTHS

MONTHLY HOUSEHOLD LIVING EXPENSES

Rent or home mortgage payments: \$ _____

Lot rent or 2nd mortgage payments: \$ _____

Are real estate taxes included? (please circle) Yes No Amount: \$ _____

Is property insurance included? (please circle) Yes No Amount: \$ _____

Utilities – Electric and heating fuel payments: \$ _____

Utilities – Water and sewer payments: \$ _____

Telephone payments: \$ _____

Other (cable satellite, internet, etc.): \$ _____

Home maintenance payments (trash, repairs, and upkeep – monthly cost): \$ _____

Food and grocery items including restaurants, fast food, snacks, lunches, supplies, toiletries, soap, paper, tobacco, and misc. – monthly cost: \$ _____

Clothing (monthly cost): \$ _____

Laundry and dry cleaning (monthly cost): \$ _____

Medical and dental expenses (monthly out-of-pocket and co-pays): \$ _____

Transportation – gas, oil, etc. (not including car payments): \$ _____

Recreation, sports, clubs, newspapers, magazines, etc.: \$ _____

Charitable contributions (include church tithing): \$ _____

Insurance – Homeowner's or renter's (not including house payments): \$ _____

Insurance – Life and health (what you pay, not what is taken from check): \$ _____

Insurance – Auto: \$ _____

Property taxes (monthly cost if not included in house payment): \$ _____

Car or truck payment (monthly): \$ _____

Car or truck payment (monthly): \$ _____

Payments for child support or alimony (monthly): Include only those not already deducted from your wages \$ _____

Daycare for children (monthly): \$ _____

Regular expenses from operation of a business, farm, or other expenses (attach a detailed statement and specify what kind of operation): \$ _____

TOTAL: \$ _____

Have you filed all tax returns that are due? (please circle) Yes No

Have you ever filed for bankruptcy before? (please circle) Yes No
(If yes, list date filed, court, and file number for all prior filings.)

CHILD SUPPORT AND ALIMONY PAID

State the amount of child support and/or alimony you pay and the name and address of the person receiving the child support/alimony.

Child Support Paid (monthly): \$ _____

Name and Address of Person Receiving Child Support:

Spousal Support Paid (monthly): \$ _____

Name and Address of Person Receiving Spousal Support:

**STATEMENT OF FINANCIAL AFFAIRS – ANSWER THE FOLLOWING QUESTIONS
IN AS MUCH DETAIL AS POSSIBLE. THESE ARE QUESTIONS THAT MUST BE
ANSWERED TO FILE YOUR CASE.**

1. INCOME FROM EMPLOYMENT OR OPERATION OF A BUSINESS:

State the gross amount of income the debtor (you) has received from employment, trade, or profession or from the operation of the debtor's business from the beginning of the calendar year to the date this case was commenced. State also the gross amounts received during the two calendar years immediately preceding this calendar year.

If married, give information for both spouses unless living separately. (You can find your year to date amount on your pay-stub; you can find your gross income from the past two years on those years' tax returns.)

year before last \$ _____ Source(s): _____

last year \$ _____ Source(s): _____

so far this year \$ _____ Source(s): _____

2. INCOME FROM SOURCES OTHER THAN EMPLOYMENT OR BUSINESS:

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately.

year before last \$ _____ Source(s): _____

last year \$ _____ Source(s): _____

so far this year \$ _____ Source(s) _____

3a. PAYMENTS TO A CREDITOR IN THE LAST 90 DAYS TOTALING \$600+

List all payments on loans, installment purchases or goods or services, and other debts, totaling more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case.

Name and Address of Creditor(s):

Date of Payments:

Amount Paid:

Amount Still Owed:

3b. PAYMENTS TO RELATIVES, FAMILY MEMBERS, AFFILIATES, ETC. IN THE LAST YEAR

List all payments made within one year immediately preceding the commencement of this case to, or for the benefit of, creditors who are or were related to you. E.g. If you paid money back to a relative or family member in the past year.

Name, Address, and Relationship of Creditor(s):

Date of Payments:

Amount Paid:

Amount Still Owed:

4. SUITS, EXECUTIONS, GARNISHMENTS, AND ATTACHMENTS WITHIN THE LAST YEAR

A. List all suits to which the debtor (you) is or was a party within one year immediately preceding the filing of this case.

Caption of Suit
and Case Number

Nature of
Proceeding

Court or Agency
and Location

Status or
Disposition

B. Describe all property that has been attached, garnished, or seized under any legal or equitable process within one year immediately preceding commencement of this case.

Name and Address of Person for Whose Benefit the Property Was Seized	Date of Seizure	Description and Value of Property
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. REPOSSESSIONS, FORECLOSURES, AND RETURNS WITHIN THE LAST YEAR

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure, or returned to the seller, within one year immediately preceding the commencement of this case.

Name and Address of Assignee	Date of Repossession Foreclosure Sale, Transfer, or Return	Description and Value of Property
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. COURT RECEIVERSHIPS OVER PROPERTY/ASSIGNMENTS ETC. IN THE LAST YEAR

A. Describe any assignment for the benefit of creditors made within 120 days immediately preceding the commencement of this case.

Name and Address of Assignee	Date of Assignment	Terms of Assignment or Settlement
_____	_____	_____
_____	_____	_____

B. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case.

Name and Address of Custodian

Court Name and Location	Case Title and Number	Date of Order	Description and Value
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

7. GIFTS OVER \$100 YOU HAVE MADE IN THE LAST YEAR OR GIFTS TO FAMILY MEMBERS OF MORE THAN \$200

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case EXCEPT ordinary and usual gifts to family members totaling less than \$200 value per individual family member and charitable contributions totaling less than \$100 per recipient.

Include church giving, tithing, and donations totaling over \$100 per recipient and donations over \$200 per family member.

Name and Address of Person or Organization	Relationship, if any, to Debtor	Date of Gift Description and Value of Gift
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_____	_____	_____
_____	_____	_____
_____	_____	_____

8. LOSSES FROM FIRE, THEFT, GAMBLING, OR ACCIDENT IN THE LAST YEAR

List all losses from fire, theft, or other casualty or gambling within one year immediately preceding the commencement of this case or since the date of commencement of this case.

Description and Value of Property	Description of Circumstances and, if Loss Was Covered in Whole or in Part by Insurance, Give Particulars	Date of Loss
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. PAYMENTS RELATED TO DEBT COUNSELING OR BANKRUPTCY IN THE LAST YEAR

List all payments made or property transferred by or on behalf of the debtor (you) to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case. Include moneys paid to your attorney and to Credit Counseling for your certificate to file bankruptcy.

Name and Address of Payee

Date of Payment	Name of Payer, if other than Debtor (you)	Amount Paid
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. ASSETS OR PROPERTY SOLD, TRANSFERRED, DISPOSED OF, DEEDED, ETC.

List all other property, other than property transferred in the ordinary course of business, or financial affairs of the debtor, transferred either absolutely or as a security within one year immediately preceding the commencement of this case.

Include any sales or transfers of assets or property you have made in the past year (sale of home, property, vehicle or other transfer).

Name and Address of Person to Whom Transfer was Made

Relationship to Debtor	Date	Describe Property Transferred and Value Received
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

11. CLOSED BANK OR FINANCIAL ACCOUNTS WITHIN THE LAST YEAR

List all financial accounts and instruments held in the name of the debtor (you) or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions.

Name and Address of Institution

Type and Number of Account
and Amount of Final Balance

Amount and Date of
Sale or Closing

12. SAFE DEPOSIT BOXES WITHIN THE LAST YEAR

List each safe deposit or other box or depository in which the debtor (you) has or has had with securities, cash, or other valuables within one year immediately preceding the commencement of this case.

Name and Address of Bank or Other Depository

Name and Address of Those With Access to Box or Depository

Description of Contents

13. FROZEN BANK ACCOUNTS, DEPOSITS OR SETOFFS BY CREDITORS

List all setoffs made by any creditor, including a bank, against an account or deposit of the debtor within 90 days preceding the commencement of this case. Example: bank funds frozen.

Name and Address of Creditor

Date of Setoff

Amount of Setoff

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

14. MONEY OR PROPERTY HELD FOR ANOTHER PERSON

List all property owned by another person that the debtor (you) holds or controls.

Name and Address of Owner

Description and Value
Of Property

Location of Property

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

15. PRIOR ADDRESSES OF DEBTOR IN THE PAST TWO YEARS

If the debtor (you) has moved within the two years immediately preceding the commencement of this case, list all premises the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

Address/Name Used if Different/ Dates of Occupancy

16. SPOUSES AND FORMER SPOUSES

If the debtor (you) has resided in a community property state (Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin), commonwealth, or territory within the six year period immediately preceding the commencement of this case, identify the name of the debtor's spouse and any former spouse who resides or resided with the debtor in the community property state.

Name

17. IF YOU HAVE ANY TOXIC WASTE, MATERIAL HAZARDOUS TO THE ENVIRONMENT, OR ANYTHING THAT IS A THREAT TO PUBLIC HEALTH OR SAFETY, GIVE DETAILS:

18. BUSINESS OWNERSHIP QUESTION

If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and the beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned five percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

Name and Taxpayer ID

Address

Nature of Business and Beginning and Ending Dates

19. BOOKS, RECORDS AND FINANCIAL STATEMENTS

List all bookkeepers and accounts who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account are not available, explain:

List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the two years immediately preceding the commencement of the case by the debtor.

20. INVENTORIES

A. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

B. List the name and address of the person having possession of the records of each of the two inventories reported in A., above.

21. INSURANCE POLICIES

Name of homeowners' or renters' insurance company and agent:

Expiration date on policy:

Name of vehicle insurance company and agent:

Expiration date on policy:

Other insurance information: