

# Bankruptcy Questionnaire Instructions

Complete & Return to:  
**Harward & Associates**  
10813 S. River Front Parkway, Ste 575  
South Jordan, UT 84095

Bankruptcy is a time honored practice that affords honest debtors the opportunity for a fresh start. Everyone filing a bankruptcy has experienced financial problems beyond his or her control. The court, trustees, and your attorney, understand this and if you comply with their instructions, they will help you out of your financial crisis. In order to help you get the relief to which you are entitled, you **must make full disclosure** of all your financial affairs. Do not try to second-guess the system -- it has been here longer than you.

Be sure to put your name at the bottom of each page. The assets and debts pages also require you to number the pages.

**Assets.** LIST ALL OF YOUR ASSETS. In all likelihood you will retain most, if not all, of your assets after the bankruptcy. Do not jeopardize your discharge by omitting anything. You can list assets by groups of similar property, e.g. "furniture", "clothing", "personal effects", etc. Your attorney will tell you how large or small your groupings can be.

Unless instructed otherwise by your attorney, do not fill in the parts surrounded by gray -- the attorney will fill in that part. If you own real estate, unless instructed otherwise, attach a copy of your legal description to these forms. (You can find your legal description on your deed, mortgage, purchase agreement, or tax statements).

**Debts.** LIST ALL OF YOUR DEBTS. You may plan to repay some creditors, including relatives and friends, but you must nevertheless list them as creditors. Your attorney can discuss with you the procedure for "reaffirming" a debt to a creditor or how to go about repaying your relatives or friends. If you have debts that are disputed, list them. If you have potential debts for which no one has yet made a direct claim against you, list them. If in doubt as to whether a creditor should be listed, list them. LIST ALL OF YOUR DEBTS. Failure to list a creditor can result in you not being discharged of your obligation to that creditor.

You will be given several sheets with spaces for listing creditors. As with assets, unless instructed otherwise by your attorney, do not fill in the parts surrounded by gray. In determining the "fair market value" of collateral, use the amount you could sell the collateral for, NOT what you paid for it.

**Executory Contracts.** These are contracts such as leases, real estate contracts, health clubs, time-shares, etc., for which either or both parties to the contract have not yet fully performed their obligations under the contract. In all likelihood you should also list these parties as creditors too.

**Codebtors.** Your codebtors are obligated to pay the debts you do not. For most people, a codebtor is just someone who cosigned a loan. However, partners, spouses and others who are not part of your petition may be liable on many of your debts without actually cosigning anything. If this is your situation you will need to attach additional sheets listing all debts for which someone else may be jointly liable.

**Income.** You must disclose your income over the last 6 months. If you are employed, you will need to provide a pay stubs for at least the last 60 days. If you are self-employed or you are a corporation or partnership, attach a financial statement showing your monthly income.

**Expenditures.** The accuracy of your estimated living expenses is essential. The trustees assigned to your case will scrutinize budgets carefully. Budgets will be compared to standards published by the IRS for your county of residence. To the extent your needs differ, your attorney can advise you about your alternatives.

If you are a partnership or a corporation, submit a financial statement indicating your monthly expenses. Individuals who are in business for themselves should include a detailed statement of their business expenses in addition to the personal expenses called for in this questionnaire.

Client Name: \_\_\_\_\_

## Filing Status

Filing Status:

- Individual
- Joint
- Partnership
- Corporation

Date: \_\_\_\_\_

Nature of Debts:

- Consumer
- Business

Attorney Fees amount Quoted: \_\_\_\_\_

Payment Plan

- Paid in Full Cash, Check, Credit Card: \_\_\_\_\_
- Installments explain: \_\_\_\_\_

Debtor

Joint Debtor

Full Name: \_\_\_\_\_

\_\_\_\_\_

All other names used \_\_\_\_\_  
you in the last 6 years \_\_\_\_\_  
(include married, maiden \_\_\_\_\_  
and trade names).

\_\_\_\_\_  
\_\_\_\_\_

Street Address : \_\_\_\_\_  
(Number Street, \_\_\_\_\_  
City, State & Zip) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

County of residence: \_\_\_\_\_

\_\_\_\_\_

Soc. Security No., Tax: \_\_\_\_\_  
ID No. \_\_\_\_\_  
( if more than one, state \_\_\_\_\_  
All).

\_\_\_\_\_

Client Name: \_\_\_\_\_

### Prior Bankruptcies

Location	Case No.	Date filed

### Employment

	Debtor	Joint Debtor
Occupation		
Name of Employer		
Employer's Address		
How long Employed		

### Dependents

Name	Age	Relationship
Name	Age	Relationship
Name	Age	Relationship
Name	Age	Relationship

## Assets

Summarize everything you and its value below. If greater detail is required, your attorney may have attached additional sheets. In reviewing the following items, be sure to follow any special instruction such as itemizing or providing further detail in your description. How items are classified may affect what exemptions you are entitled to so if you do not know how to classify a particular item, ask your attorney to help.

Real Property \_\_\_\_\_ Value Now: \_\_\_\_\_

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

### Personal Property

1. Cash on Hand \_\_\_\_\_

2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan and homestead associations, or credit unions, brokerage houses, or cooperatives.

Account No. \_\_\_\_\_

3. Security deposits with public utilities, telephone companies, landlords, and others. (Amounts) \_\_\_\_\_

4. Housing Goods & Furnishings, check all that apply. List **value & Quantity** next to item.

<p><b>Living room items:</b></p> <p><input type="checkbox"/> Couch _____</p> <p><input type="checkbox"/> loveseat _____</p> <p><input type="checkbox"/> coffee table _____</p> <p><input type="checkbox"/> end table _____</p> <p><input type="checkbox"/> display/ or bookcase _____</p> <p><input type="checkbox"/> sofa table _____</p> <p><input type="checkbox"/> floor lamps _____</p> <p><input type="checkbox"/> table lamps _____</p> <p><input type="checkbox"/> oversized sofa chair _____</p> <p><input type="checkbox"/> speakers _____</p> <p><input type="checkbox"/> sofa pillows _____</p> <p><b>Dining Room Items</b></p> <p><input type="checkbox"/> dining room table _____</p> <p><input type="checkbox"/> chairs _____</p> <p><input type="checkbox"/> cabinets _____</p> <p><input type="checkbox"/> Other _____</p>	<p><b>Bathroom:</b></p> <p><input type="checkbox"/> blow dryer _____</p> <p><input type="checkbox"/> make up mirror _____</p> <p><input type="checkbox"/> flat iron _____</p> <p><input type="checkbox"/> trash cans _____</p> <p><input type="checkbox"/> magazine holder _____</p> <p><input type="checkbox"/> cabinets _____</p> <p><input type="checkbox"/> scale _____</p> <p><input type="checkbox"/> towels _____</p> <p><b>Audio video, computer items:</b></p> <p><input type="checkbox"/> TV's _____</p> <p><input type="checkbox"/> Stereo receivers _____</p> <p><input type="checkbox"/> CD changers _____</p> <p><input type="checkbox"/> DVD players _____</p> <p><input type="checkbox"/> am/fm tuner/radio _____</p> <p><input type="checkbox"/> Entertainment center _____</p> <p><input type="checkbox"/> surround sound _____</p> <p><input type="checkbox"/> Ipod, equipt. _____</p> <p><input type="checkbox"/> head phones _____</p>
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**Bedroom:**

- beds need size \_\_\_\_\_
- dressers \_\_\_\_\_
- side tables \_\_\_\_\_
- lamps \_\_\_\_\_
- cabinets \_\_\_\_\_
- bedding \_\_\_\_\_
- desk \_\_\_\_\_
- bookshelves \_\_\_\_\_

**Kitchen Items:**

- Oven/ stove \_\_\_\_\_
- refrigerator \_\_\_\_\_
- dishwasher \_\_\_\_\_
- Microwave \_\_\_\_\_
- rugs \_\_\_\_\_
- Pots & pans \_\_\_\_\_
- utensils \_\_\_\_\_
- dishes \_\_\_\_\_
- toaster \_\_\_\_\_
- crockpot \_\_\_\_\_
- grill \_\_\_\_\_
- coffee/espresso machine \_\_\_\_\_
- bread maker \_\_\_\_\_
- blender \_\_\_\_\_
- Ice cream machine \_\_\_\_\_
- juicer \_\_\_\_\_
- cooking utensils \_\_\_\_\_
- Food \_\_\_\_\_
- TV \_\_\_\_\_
- stools \_\_\_\_\_
- table/chairs \_\_\_\_\_
- trash cans \_\_\_\_\_

**Laundry Room:**

- washer \_\_\_\_\_
- dryer \_\_\_\_\_
- vacuum \_\_\_\_\_
- mop/ broom \_\_\_\_\_

**Patio furniture**

- chairs \_\_\_\_\_
- table \_\_\_\_\_
- bird feeder \_\_\_\_\_
- flower pots \_\_\_\_\_
- wind chime \_\_\_\_\_
- thermometer \_\_\_\_\_
- BBQ \_\_\_\_\_
- various baskets \_\_\_\_\_
- rocks, shells \_\_\_\_\_
- fireplace \_\_\_\_\_
- light fixtures \_\_\_\_\_

**Exercise equipment:**

- treadmill/ elliptical \_\_\_\_\_
- weights set \_\_\_\_\_
- therapy ball \_\_\_\_\_
- exercise ball \_\_\_\_\_
- other explain \_\_\_\_\_

**Tools:**

- circular saw \_\_\_\_\_
- Tools: Misc. \_\_\_\_\_
- jig saw \_\_\_\_\_
- drills \_\_\_\_\_
- chain saw \_\_\_\_\_
- dremel tool \_\_\_\_\_
- battery charger \_\_\_\_\_
- ladders \_\_\_\_\_
- painting supplies \_\_\_\_\_
- hoses \_\_\_\_\_
- extension cord \_\_\_\_\_
- door mats \_\_\_\_\_
- snow shovel \_\_\_\_\_
- snow blower \_\_\_\_\_

**Office equipment:**

- cell phones \_\_\_\_\_
- camera \_\_\_\_\_
- printer \_\_\_\_\_
- fax machine \_\_\_\_\_
- shredder \_\_\_\_\_
- paper cutters \_\_\_\_\_
- computers \_\_\_\_\_
- monitor \_\_\_\_\_
- photo viewer \_\_\_\_\_
- carosel projector \_\_\_\_\_
- projector table \_\_\_\_\_
- projector speakers \_\_\_\_\_
- tri pods \_\_\_\_\_
- umbrellas \_\_\_\_\_
- light stands \_\_\_\_\_
- USB hubs \_\_\_\_\_
- photo paper \_\_\_\_\_
- desk/ and chair \_\_\_\_\_
- Filing cabinet \_\_\_\_\_
- Bookshelves \_\_\_\_\_
- Books \_\_\_\_\_
- Envelopes \_\_\_\_\_

**Out Door Items:**

- play ground set \_\_\_\_\_
- trampoline \_\_\_\_\_
- garden features \_\_\_\_\_

**5. Books, pictures, art objects:**

- books
- pictures
- art
- antiques
- pottery
- décor items
- Other

**6. Wearing apparel:**

- clothes/ & jackets
- shoes
- hats

**7. furs & Jewelry:**

- Wedding rings, both
- Earrings
- Necklaces
- Bracelets
- Furs

**8. Fire arms sports:**

- Guns
- Bicycles
- Skis
- Ski boots
- Backpacking, fishing pole
- Camping gear
- Sleeping bags
- Propane stove
- Water jugs
- Cooking pans
- Tents
- Camping chairs
- Coolers
- Bike rack
- Scuba gear
- Inflatable boats, pools
- Water slides
- Tire pump
- Horse back riding gear
- Photographic equipment
- Digital camera
- Digital camcorder

**Musical instruments:**

- Guitars
- Drums
- Violins
- Mandolin
- Other

## Assets Continued

9. Interest in insurance company  
give company name & address & total interest \_\_\_\_\_  
\_\_\_\_\_
10. Annuities: \_\_\_\_\_  
\_\_\_\_\_
11. Education debts: \_\_\_\_\_
12. IRA: \_\_\_\_\_
13. Stocks: \_\_\_\_\_
14. Partnerships: \_\_\_\_\_
15. Bonds: \_\_\_\_\_
16. Accounts receivable: \_\_\_\_\_
17. Social Security: \_\_\_\_\_
18. Liquidated debts: \_\_\_\_\_
19. Future interest: \_\_\_\_\_
20. Trust: \_\_\_\_\_
21. unliquidated claims: \_\_\_\_\_
22. Patents: \_\_\_\_\_
23. Licenses: \_\_\_\_\_
24. Customer lists: \_\_\_\_\_
25. List Automobiles, trailers, RV etc.: \_\_\_\_\_  
\_\_\_\_\_
26. Boats: \_\_\_\_\_
27. Aircraft: \_\_\_\_\_
28. Office equipment: \_\_\_\_\_
29. Business equipment: \_\_\_\_\_
30. Inventories: \_\_\_\_\_
31. Breed of animals: \_\_\_\_\_
32. Crops: \_\_\_\_\_
33. Farming equipment: \_\_\_\_\_
34. Farm supplies: \_\_\_\_\_
35. Other personal property not listed above: \_\_\_\_\_  
\_\_\_\_\_

## Real Property

Description
-------------

Location
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Market Value \$
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Lien Holder (name address & account no. (1 <sup>st</sup> Mortgage)	Intention of Property: circle one: Surrender Reaffirm redeem void Retain	Amount you Owe: \$
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Lien Holder (name address & account no. (2 <sup>nd</sup> Mortgage)	Intention of Property: circle one: Surrender Reaffirm redeem void Retain	Amount you Owe: \$
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Description
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Location
----------

Market Value \$
--------------------

Lien Holder (name address & account no.	Intention of Property: circle one: Surrender Reaffirm redeem void Retain	Amount you Owe: \$
---	---	-----------------------



## Automobiles

Year/ make/ Model	Property Condition: circle one:  <div style="text-align: center; padding: 5px;">                 Excellent    Good    Fair    Poor             </div>
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Lien Holder (name address & account no.)	Intention of Property: circle one:  Surrender Reaffirm Redeem Void Retain	Amount you Owe \$  Market Value: \$
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Lien Holder (name address & account no.)	Intention of Property: circle one:  Surrender Reaffirm redeem void Retain	Amount you Owe: \$  Value: \$
--	---	---

Lien Holder (name address & account no.)	Intention of Property: circle one:  Surrender Reaffirm redeem void Retain	Amount you Owe: \$  Value: \$
--	---	---

Lien Holder (name address & account no.)	Intention of Property: circle one:  Surrender Reaffirm redeem void Retain	Amount you Owe: \$  Value: \$
--	---	---

Year/ make/ Model	Property Condition: circle one:  <div style="text-align: center; padding: 5px;">                 Excellent    Good    Fair    Poor             </div>
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Lien Holder (name address & account no.)	Intention of Property: circle one:  Surrender Reaffirm Redeem Void Retain	Amount you Owe \$  Market Value: \$
--	---	---

## Executory Contracts

Name and Address of Party:	Description of Contract:

- Contract is a lease for NONRESIDENTIAL real property
- Surrender property – reject lease
- Government contract No,  
if any \_\_\_\_\_

Name and Address of Party:	Description of Contract:

- Contract is a lease for NONRESIDENTIAL real property
- Surrender property – reject lease
- Government contract No,  
if any \_\_\_\_\_

Name and Address of Party:	Description of Contract:

- Contract is a lease for NONRESIDENTIAL real property
- Surrender property – reject lease
- Government contract No,  
if any \_\_\_\_\_

## Creditor/ Debt Information \*

Creditor Name \_\_\_\_\_ Account Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Amount you owe: \_\_\_\_\_

Date you opened the account: \_\_\_\_\_ Who's name is the account under? \_\_\_\_\_

Type of Debt choose one:

- Taxes,  Medical Bills,  Store Credit Cards,  Bank credit Cards,  School Loans,  Personal Loans,  
 Home improvement loan,  Executory contracts,  car loan,  Home loan,  Real-estate.

Collection agency Name \_\_\_\_\_ Account Number: \_\_\_\_\_

Collection agency Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Amount you owe: \_\_\_\_\_

Date you opened the account: \_\_\_\_\_ Who's name is the account under? \_\_\_\_\_

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- Taxes,  Medical Bills,  Store Credit Cards,  Bank credit Cards,  School Loans,  Personal Loans,  
 home improvement loan,  Executory contracts,  car loan,  Home Loan,  Real-estate.

Collection agency Name \_\_\_\_\_ Account Number: \_\_\_\_\_

Collection agency Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Amount you owe: \_\_\_\_\_

Date you opened the account: \_\_\_\_\_ Who's name is the account under? \_\_\_\_\_

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- Taxes,  Medical Bills,  Store Credit Cards,  Bank credit Cards,  School Loans,  Personal Loans,  
 home improvement loan,  Executory contracts,  car loan,  Home Loan,  Real-estate.

Collection agency Name \_\_\_\_\_ Account Number: \_\_\_\_\_

Collection agency Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

## Creditor/ Debt Information Continued \*

Creditor Name \_\_\_\_\_ Account Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Amount you owe: \_\_\_\_\_

Date you opened the account: \_\_\_\_\_ Who's name is the account under? \_\_\_\_\_

Type of Debt choose one:

- Taxes,  Medical Bills,  Store Credit Cards,  Bank credit Cards,  School Loans,  Personal Loans,  
 Home improvement loan,  Executory contracts,  car loan,  Home loan,  Real-estate.

Collection agency Name \_\_\_\_\_ Account Number: \_\_\_\_\_

Collection agency Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Amount you owe: \_\_\_\_\_

Date you opened the account: \_\_\_\_\_ Who's name is the account under? \_\_\_\_\_

Type of Debt choose one:

- Taxes,  Medical Bills,  Store Credit Cards,  Bank credit Cards,  School Loans,  Personal Loans,  
 home improvement loan,  Executory contracts,  car loan,  Home Loan,  Real-estate.

Collection agency Name \_\_\_\_\_ Account Number: \_\_\_\_\_

Collection agency Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Amount you owe: \_\_\_\_\_

Date you opened the account: \_\_\_\_\_ Who's name is the account under? \_\_\_\_\_

Type of Debt choose one:

- Taxes,  Medical Bills,  Store Credit Cards,  Bank credit Cards,  School Loans,  Personal Loans,  
 home improvement loan,  Executory contracts,  car loan,  Home Loan,  Real-estate.

Collection agency Name \_\_\_\_\_ Account Number: \_\_\_\_\_

Collection agency Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

\* If you need more room please attach the continued pages.

# Income & Expenses

Debtor

How often are you paid?

Monthly  Semi Monthly (twice each month)  Bi-Weekly (every other Friday)  Weekly:

	Income from Pay Stubs	other monthly Income
<b>Gross Pay</b>		
<b>Per Paycheck</b>	_____	From your Business _____
<b>Deductions:</b>		From real Property _____
Federal Income Tax	_____	Interest & Dividends _____
State Income Tax:	_____	Alimony Child Support _____
FICA/ Medicare:	_____	Social Security Gov. Assistance _____
Insurance: _	_____	Retirement _____
Savings/ bonds:	_____	other, specify _____
Union	_____	other, specify _____
Pension/ 401 K	_____	
Credit Union Savings	_____	
Credit Union Loan	_____	
Child Support	_____	
Garnishments	_____	
<b>Take Home Pay</b>	_____	
<b>per Paycheck</b>		
Other Sources of Income	_____	

# Income & Expenses Continued

Co- Debtor

How often are you paid?

Monthly  Semi Monthly (twice each month)  Bi-Weekly (every other Friday)  Weekly:

	Income from Pay Stubs	other monthly Income
<b>Gross Pay Per Paycheck</b>	_____	From your Business _____
<b>Deductions:</b>		From real Property _____
Federal Income Tax	_____	Interest & Dividends _____
State Income Tax:	_____	Alimony Child Support _____
FICA/ Medicare:	_____	Social Security Gov. Assistance _____
Insurance: _	_____	Retirement _____
Savings/ bonds:	_____	other, specify _____
Union	_____	other, specify _____
Pension/ 401 K	_____	
Credit Union Savings	_____	
Credit Union Loan	_____	
Child Support	_____	
Garnishments	_____	
<b>Take Home Pay per Paycheck</b>	_____	

Other Sources of Income \_\_\_\_\_

**Expenses**

Deductions:

Rent/ Mortgage Payments \_\_\_\_\_

Electric Bill \_\_\_\_\_

Gas Bill \_\_\_\_\_

Water/ Sewer \_\_\_\_\_

Telephone \_\_\_\_\_

Cable TV \_\_\_\_\_

Home Maintenance \_\_\_\_\_

Food \_\_\_\_\_

Clothing \_\_\_\_\_

Medical/ Dental \_\_\_\_\_

Gasoline/ Bus Fare \_\_\_\_\_

Entertainment \_\_\_\_\_

Charity/ Church \_\_\_\_\_

**Insurance:**

Home Owners/renters \_\_\_\_\_

Life \_\_\_\_\_

Auto \_\_\_\_\_

Health \_\_\_\_\_

Non payroll taxes \_\_\_\_\_

Car payment \_\_\_\_\_

Alimony \_\_\_\_\_

Child Care expenses \_\_\_\_\_

# Statement of Financial Affairs

If you are married and filing a joint petition, include information for both spouses. If you are married and plan to file under chapter 12 or 13 then you must furnish information for both spouses whether or not you plan to file a joint petition, unless you are separated and plan to file individually. If you are engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, you should also provide the information requested on this statement concerning all such activities as well as your personal affairs.

Answer all questions. If the answer to any question is "None," or the question is not applicable, mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the number of the question.

REMEMBER, for all questions, if you are married and filing under chapter 12 or chapter 13 you must include information applicable to either or both spouses whether or not a joint petition is filed, unless you are separated and a joint petition is not to be filed.)

## 1. Income from employment or operation of business

State the gross amount of income you have received from employment, trade, or profession, or from operation of your business from the beginning of this calendar year to the present. State also the gross amounts received during the **two years** immediately preceding this calendar year. (If you maintain, or have maintained, financial records on the basis of a fiscal rather than a calendar year you may report fiscal year income. Identify the beginning and ending dates of your fiscal year) If a joint petition is to be filed, state income for each spouse separately.

	YEAR	AMOUNT	SOURCE (if more than one)
Debtor (H)	This year	\$	
		\$	
		\$	
Wife	This year	\$	
		\$	
		\$	

## 2. Income other than from employment or operation of

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

	YEAR	AMOUNT	SOURCE (give particulars)
Debtor (H)		\$	
		\$	
Wife		\$	
		\$	



NONE

**3. Payments to creditors**

a. Individual or Joint Consumer Debtors. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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NONE

b. Business Debtors. List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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NONE

c. All Debtors. 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 insiders\*.

\*The term "insider" includes but is not limited to: your relatives; general partners and their relatives; corporations of which you are an officer, director, or person in control; officers, directors, and any person in control of a corporate debtor and their relatives; affiliates of yours and insiders of such affiliates; any managing agent of yours.

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
---	-------------------	-------------	--------------------

Client Name: \_\_\_\_\_

**4. Suits and administrative proceedings, executions, garnishments and attachments**

NONE

a. List all suits and administrative proceedings to which you are or were a party within **one year** immediately preceding the filing of this bankruptcy case.

CAPTION OF SUIT  
AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY  
AND LOCATION

STATUS OR  
DISPOSITION

NONE

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the filing of this bankruptcy case.

NAME AND ADDRESS  
OF PERSON FOR WHOSE  
BENEFIT PROPERTY WAS SEIZED

DATE OF  
SEIZURE

DESCRIPTION  
AND VALUE OF  
PROPERTY

Client Name: \_\_\_\_\_

**5. Repossessions, foreclosures and returns**

NONE

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 CREDITOR OR SELLER

DATE OF REPOSSESSION,  
FORECLOSURE SALE,  
TRANSFER OR RETURN

DESCRIPTION  
AND VALUE OF  
PROPERTY

**6. Assignments and receiverships**

NONE

a. Describe any assignment of property 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

NONE

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

NAME AND ADDRESS  
OF CUSTODIAN

NAME AND LOCATION  
OF COURT  
CASE TITLE & NUMBER

DATE OF  
ORDER

DESCRIPTION  
AND VALUE OF  
PROPERTY

Client Name: \_\_\_\_\_

**7. Gifts**

NONE

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 aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient.

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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**8. Losses**

NONE

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

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCE AND, IF LOSS WAS COVERD IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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**9. Payments related to debt counseling or bankruptcy**

NONE

List all payments made or property transferred by or on behalf of you to any person, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case or since the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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Client Name: \_\_\_\_\_

**10. Other transfers**

NONE

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

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
---	------	--

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

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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**11. Closed financial accounts**

NONE

List all financial accounts and instruments held in your name or for your benefit 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 account held in banks, credit unions, pensions 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
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**12. Safe deposit boxes**

NONE

List each safe deposit or other box or depository in which you have or had 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 ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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Client Name: \_\_\_\_\_

**13. Setoffs**

NONE

List all setoffs made by any creditor, including a bank, against a debt or deposit of yours within **90 days** preceding the commencement of this case.

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

**14. Property held for another person**

NONE

List all property owned by another person that you hold or control.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

**15. Prior address of debtor**

NONE

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

ADDRESS

NAME USED

DATES OF OCCUPANCY

Client Name: \_\_\_\_\_

**16. Spouses and Former Spouses**

NONE

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

NAME

**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

NONE

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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NONE

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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NONE

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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Client Name: \_\_\_\_\_

18. Nature, location and name of business

NONE

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and 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 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	TAXPAYER I.D. NUMBER	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES OF OPERATION
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NONE

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

Client Name: \_\_\_\_\_



The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

**19. Books, records and statements**

NONE

a. List all bookkeepers and accountants who within the six years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of yours books of account and records.

NAME AND ADDRESS

DATE SERVICES RENDERED

NONE

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

NAME

ADDRESS

DATE SERVICES RENDERED

NONE

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

NAME

ADDRESS

NONE

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

NAME AND ADDRESS

DATED ISSUED

Client Name: \_\_\_\_\_

**20. Inventories**

NONE

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.

DATES OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY  
Specify cost, market or other basis)

NONE

b. List the and address of the person having possession of the records of each of the two inventories reported in a., above.

DATES OF INVENTORY

**21. Current Partners, Officers, Directors and Shareholders**

NONE

a. If you are a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

NONE

b. If you are a corporation, all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or hold 5 percent or more of the voting securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP

Client Name: \_\_\_\_\_

**22. Former Partners, Officers, Directors and Shareholders**

NONE

a. If you are a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

NONE

b. If you are a corporation, list all officers whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

**23. Withdrawals from a partnership or distributions by a corporation**

NONE

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS  
OF RECIPIENT,  
RELATIONSHIP TO DEBTOR

DATE AND PURPOSE  
OF WITHDRAWAL

AMOUNT OF MONEY  
OR DESCRIPTION  
AND VALUE OF PROPERTY

**24. Tax Consolidation Group**

NONE

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER

**25. Pension Funds**

NONE

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER

Client Name: \_\_\_\_\_