



2945 Townsgate Road, Suite 200 Westlake Village, CA 91361 818.889.8080 [jdf@johndfaucher.com](mailto:jdf@johndfaucher.com)

## **Bankruptcy Information Questionnaire**

The information in this questionnaire will be used to complete the bankruptcy petition that will be filed in bankruptcy court. The petition documents your assets, debts, income and recent financial history. Once your bankruptcy petition is filed, you will sign it and swear – under penalty of perjury – that the information contained in it is a complete summary of your finances. This means answering truthfully and accurately all the questions in this questionnaire. If you hope to obtain your bankruptcy discharge quickly and smoothly, then you must disclose everything. Please contact me or Karen with any questions.

### **Instructions:**

1. Answer every question and fill in every box. If it does not apply to you, then write NA.
2. Attach additional pages if the space provided is insufficient.
3. List ALL of your debts. Do not omit *any* creditor, property or financial transaction just because you mentioned it to me, or because you intend to repay them.
4. Do not omit any assets just because they have little value. For personal property, value items (such as furniture) at what it would bring at a garage sale.

### **Documentation the Bankruptcy Court requires; please return with the Questionnaire:**

1. Proof of Income for past 6 months:
  - a. If employed, copies of pay stubs/W2s
  - b. If a contractor, copies of all 1099s; if self-employed/own business, Profit & Loss Statement and Balance Sheet
  - c. If retired, copies of Social Security, pension & retirement payments
2. Most recent Federal and State tax return
3. Copy of one major Credit Report (Equifax, Experian, Trans Union); obtain at [AnnualCreditReport.com](http://AnnualCreditReport.com)
4. Copy of most recent bank account statements
5. Certificate of Credit Counseling from Allen Credit & Debt Counseling; see retainer letter for details.

# General Information

	Debtor 1	Debtor 2
First, Middle, Last Name		
Address		
Social Security Number		
Date of Birth		
Alias Names: maiden, DBA		
Prior Bankruptcy: Location, Case No., Date		

## Assets

### 1. Real Estate

Prop. 1 Street Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

No. of bedrooms, no. baths, square footage \_\_\_\_\_ Date Purchased \_\_\_\_\_

Type:  Single Family  Condo/Townhouse  Rental  Industrial  Land  Other

Mortgage 1: Creditor Name \_\_\_\_\_

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

Account No. \_\_\_\_\_ Balanced Owed \$ \_\_\_\_\_

Mortgage 2: Creditor Name \_\_\_\_\_

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

Account No. \_\_\_\_\_ Balanced Owed \$ \_\_\_\_\_

Prop. 2 Street Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

No. of bedrooms, no. baths, square footage \_\_\_\_\_ Date Purchased \_\_\_\_\_

Type:  Single Family  Condo/Townhouse  Rental  Industrial  Land  Other

Mortgage 1: Creditor Name \_\_\_\_\_

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

Account No. \_\_\_\_\_ Balanced Owed \$ \_\_\_\_\_

Mortgage 2: Creditor Name \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Account No. \_\_\_\_\_ Balanced Owed \$ \_\_\_\_\_

## 2. Vehicles

Type:  Car  Truck  Motorcycle  Trailer  RV  Tractor  Trailer  ATV  Boat  
Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Mileage \_\_\_\_\_

Loan: Creditor Name \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Account No. \_\_\_\_\_ Balanced Owed \$ \_\_\_\_\_

Type:  Car  Truck  Motorcycle  Trailer  RV  Tractor  Trailer  ATV  Boat  
Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Mileage \_\_\_\_\_

Loan: Creditor Name \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Account No. \_\_\_\_\_ Balanced Owed \$ \_\_\_\_\_

Type:  Car  Truck  Motorcycle  Trailer  RV  Tractor  Trailer  ATV  Boat  
Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Mileage \_\_\_\_\_

Loan: Creditor Name \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Account No. \_\_\_\_\_ Balanced Owed \$ \_\_\_\_\_

Type:  Car  Truck  Motorcycle  Trailer  RV  Tractor  Trailer  ATV  Boat  
Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Mileage \_\_\_\_\_

Loan: Creditor Name \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Account No. \_\_\_\_\_ Balanced Owed \$ \_\_\_\_\_

## Household Items

For items 6-14, please estimate what you could sell all the items for at a garage sale or eBay.

6. Furnishings, appliances, household goods (such as kitchen items) Value \$ \_\_\_\_\_
7. Electronics, computers, printers, stereos, tv, cameras, phones Value \$ \_\_\_\_\_
8. Collectibles such as antiques, baseball cards, artwork, coins Value \$ \_\_\_\_\_

- 9. Sports equipment Value \$ \_\_\_\_\_
- 10. Firearms Value \$ \_\_\_\_\_
- 11. Clothing & Shoes Value \$ \_\_\_\_\_
- 12. Jewelry, watches, gems, gold Value \$ \_\_\_\_\_
- 13. Pets and non-farm animals (if pure-breed or used for breeding) Value \$ \_\_\_\_\_
- 14. Anything else in your home not covered in the above categories Value \$ \_\_\_\_\_

**16. Cash on Hand** Amount \$ \_\_\_\_\_

**17. Checking, Savings & Certificates of Deposit**

Bank/Financial Institution Name \_\_\_\_\_

Account No. \_\_\_\_\_ Balance \$ \_\_\_\_\_

Type:  Checking  Savings  CD  Other Ownership:  Debtor 1  Debtor 2  Both

Bank/Financial Institution Name \_\_\_\_\_

Account No. \_\_\_\_\_ Balance \$ \_\_\_\_\_

Type:  Checking  Savings  CD  Other Ownership:  Debtor 1  Debtor 2  Both

Bank/Financial Institution Name \_\_\_\_\_

Account No. \_\_\_\_\_ Balance \$ \_\_\_\_\_

Type:  Checking  Savings  CD  Other Ownership:  Debtor 1  Debtor 2  Both

Bank/Financial Institution Name \_\_\_\_\_

Account No. \_\_\_\_\_ Balance \$ \_\_\_\_\_

Type:  Checking  Savings  CD  Other Ownership:  Debtor 1  Debtor 2  Both

Bank/Financial Institution Name \_\_\_\_\_

Account No. \_\_\_\_\_ Balance \$ \_\_\_\_\_

Type:  Checking  Savings  CD  Other Ownership:  Debtor 1  Debtor 2  Both

Bank/Financial Institution Name \_\_\_\_\_

Account No. \_\_\_\_\_ Balance \$ \_\_\_\_\_

Type:  Checking  Savings  CD  Other Ownership:  Debtor 1  Debtor 2  Both

**18. Bond Funds, Mutual Funds, Publicly-Traded Stocks**

Financial Institution \_\_\_\_\_ Account No. \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

Financial Institution \_\_\_\_\_ Account No. \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

Financial Institution \_\_\_\_\_ Account No. \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

**19. Business Interest in Non-Publicly Traded Stock, LLC, Partnerships, Joint Vent**

Institution \_\_\_\_\_ Address \_\_\_\_\_

% of Ownership \_\_\_\_\_ Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

**20. Corporate & Government Bonds; Other Negotiable Instruments**

Financial Institution \_\_\_\_\_ Account No. \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

**21. Retirement & Pension Accounts**

Institution \_\_\_\_\_ Type:  401k/403b  Pension  IRA  Other

Ownership:  Debtor 1  Debtor 2  Both Date Opened \_\_\_\_\_ Balance \$ \_\_\_\_\_

Institution \_\_\_\_\_ Type:  401k/403b  Pension  IRA  Other

Ownership:  Debtor 1  Debtor 2  Both Date Opened \_\_\_\_\_ Balance \$ \_\_\_\_\_

Institution \_\_\_\_\_ Type:  401k/403b  Pension  IRA  Other

Ownership:  Debtor 1  Debtor 2  Both Date Opened \_\_\_\_\_ Balance \$ \_\_\_\_\_

**22. Security Deposits**

Institution/Landlord \_\_\_\_\_ Address \_\_\_\_\_

Amount \$ \_\_\_\_\_ Type:  Utilities  Rent  Other

**23. Annuities**

Institution \_\_\_\_\_ Address \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

**24. Education Accounts for Children (529 Plans, State Tuition Plans)**

Institution \_\_\_\_\_ Value \$ \_\_\_\_\_

Institution \_\_\_\_\_ Value \$ \_\_\_\_\_

**25. Trusts/Equitable/Future Properties**

Name \_\_\_\_\_ Value \$ \_\_\_\_\_

Description \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

**26. Patents, Copyrights, Trademarks, and Other Intellectual Property**

Name \_\_\_\_\_ Value \$ \_\_\_\_\_

Description \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

**27. Licenses, Franchises, Other General Intangibles**

Name \_\_\_\_\_ Value \$ \_\_\_\_\_

Description \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both

**28. Tax Refunds**

Federal  State Amount \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2

**29. Family Support**

Source/Name of Support \_\_\_\_\_ Value \$ \_\_\_\_\_

Alimony  Maintenance  Child Support  Divorce Settlement  Property Settlement

**30. Other Amounts Owed to Debtor**

By Whom & Reason \_\_\_\_\_ Value \$ \_\_\_\_\_

**31. Insurance Policies**

Company \_\_\_\_\_ Beneficiary \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2

**32. Inheritance/Property Due to You from Someone who has Died**

Description \_\_\_\_\_ From \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**33. Claims Against Third Parties**

Description \_\_\_\_\_ Name of Party \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**33. Other Contingent & Unliquidated Claims such as Counterclaims**

Description \_\_\_\_\_ Name of Party \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**35. Other Financial Assets (such as unexercised stock options)**

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**38. Accounts Receivable or Commissions**

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**39. Office Equipment & Supplies**

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**40. Fixtures & Tools**

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**41. Inventory**

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**42. Interests in Partnerships or Joint Ventures**

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

**43. Customer Lists or Mailing Lists**

Description \_\_\_\_\_ Value \_\_\_\_\_

## 47. Farm Animals

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

## 48. Crops

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

## 49. Farm & Fishing Machinery, Tools, Supplies, Chemicals & Feed

Description \_\_\_\_\_

Value \$ \_\_\_\_\_ Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

# Liabilities & Debts

## 1. Unsecured Debts

List all debts you owe to any person or institution. Unsecured debts do not have collateral to back them up (the way a house is collateral if a person fails to pay their mortgage). The most common types of unsecured debt are credit cards, student loans, medical bills, personal loans.

Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_

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

Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_

Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_

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

Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_

Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_

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

Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_

Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)

Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_



Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_  
Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)  
Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_  
Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)  
Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_  
Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)  
Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_  
Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)  
Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_  
Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)  
Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_

Creditor Name \_\_\_\_\_ Account No. \_\_\_\_\_  
Creditor Address \_\_\_\_\_  
Balance \$ \_\_\_\_\_ Type:  Credit Card  Medical  Other (specify) \_\_\_\_\_  
Ownership:  Debtor 1  Debtor 2  Both  1 Debtor & Other(s)  
Collector? If so, Name \_\_\_\_\_ Address \_\_\_\_\_

## 2. Secured Debts

List all secured debts you owe to any person or institution that you haven't already listed (such as a mortgage or car loan). The most common types of secured debt are liens and legal judgments as a result of having been sued.

Name \_\_\_\_\_ Case/Account No. \_\_\_\_\_

Date Lien/Judgment Filed or Liability Incurred \_\_\_\_\_ Amount Owed \$ \_\_\_\_\_

If a Legal Judgment: Court Jurisdiction \_\_\_\_\_

Name \_\_\_\_\_ Case/Account No. \_\_\_\_\_

Date Lien/Judgment Filed or Liability Incurred \_\_\_\_\_ Amount Owed \$ \_\_\_\_\_

If a Legal Judgment: Court Jurisdiction \_\_\_\_\_

## 3. Special Kinds of Debt

### Back Taxes Owed to Any Federal, State or Local Tax Authorities

Agency \_\_\_\_\_ Tax Year \_\_\_\_\_ Type of Tax \_\_\_\_\_

When was tax return filed? \_\_\_\_\_ Amount Agency Claims You Owe \$ \_\_\_\_\_

Agency \_\_\_\_\_ Tax Year \_\_\_\_\_ Type of Tax \_\_\_\_\_

When was tax return filed? \_\_\_\_\_ Amount Agency Claims You Owe \$ \_\_\_\_\_

Agency \_\_\_\_\_ Tax Year \_\_\_\_\_ Type of Tax \_\_\_\_\_

When was tax return filed? \_\_\_\_\_ Amount Agency Claims You Owe \$ \_\_\_\_\_

### Support Orders: Anyone to Whom You Owe Financial Support

Recipient \_\_\_\_\_ Monthly Amount \$ \_\_\_\_\_

Description \_\_\_\_\_

### Wages, Salaries & Commissions Owed to Anyone

Recipient \_\_\_\_\_ Monthly Amount \$ \_\_\_\_\_

Description \_\_\_\_\_

## **Income & Expenditures**

### **Dependent(s)**

Name	Age	Relationship	Lives With	Claimed by

### **Employment**

	Debtor 1	Debtor 2
Employer Name & Address		
Occupation		
Length of Employment	___ years, ___ months	___ years, ___ months

### **Monthly Income**

	Debtor 1	Debtor 2
Monthly Gross: Wages, Salary, Commissions, Business Income		
Unemployment Compensation		
Social Security		
Pension or retirement		
Other Income, specify:		

### **Monthly Expenses**

Rent or Mortgage Payment	\$
Property Taxes	\$
Homeowner's/Renter's Insurance	\$
Home Maintenance (repair/upkeep)	\$
Homeowner's/Condo Association Dues	\$
Utilities	
Electricity, Gas, Water, Sewer, Trash	\$
Phone, Cable, Satellite & Internet	\$

Food	\$
Childcare & Children's Education	\$
Clothing, Laundry & Dry Cleaning	\$
Personal Care Products/Services	\$
Medical & Dental (other than insurance)	\$
Gas & Transportation (other than car payments)	\$
Recreation, Entertainment	\$
Charitable Contributions	\$
Insurance	
Car	\$
Medical & Dental	\$
Other (specify): _____	\$
Car Payment for Vehicle 1	\$
Car Payment for Vehicle 2	\$
Alimony, maintenance, support	\$
Other (specify): _____	\$
Other (specify): _____	\$

## Statement of Financial Affairs

**2. List all the places you have lived, other than current address, in the past 3 years.**

\_\_\_\_\_

Dates of Occupancy \_\_\_\_\_ Dates of Occupancy \_\_\_\_\_

**3. Within the past 8 years, did you ever live with a spouse in a community property state (AZ, CA, ID, LA, NV, NM, PR, TX, WA and WI)?**  Yes  No

**4. Fill in the total amount of gross income (before-tax income) that you (and your spouse) received from all *jobs, employment and businesses*, including part time activities, for this year-to-date and the two previous calendar years.**

	Debtor 1	Debtor 2
<b>YTD</b>	\$ _____ Source _____	\$ _____ Source _____
	\$ _____ Source _____	\$ _____ Source _____

	\$ _____ Source _____	\$ _____ Source _____
<b>20__</b>	\$ _____ Source _____	\$ _____ Source _____
	\$ _____ Source _____	\$ _____ Source _____
	\$ _____ Source _____	\$ _____ Source _____
<b>20__</b>	\$ _____ Source _____	\$ _____ Source _____
	\$ _____ Source _____	\$ _____ Source _____
	\$ _____ Source _____	\$ _____ Source _____

**5. Fill in the total amount of income received from all non-employment sources** such as social security, unemployment, retirement/pension, veteran's benefits, alimony, child support, worker's compensation, welfare, inheritance, property sales, or investment sales and income.

	<b>Debtor 1</b>	<b>Debtor 2</b>
<b>YTD</b>	\$ _____ Source _____	\$ _____ Source _____
	\$ _____ Source _____	\$ _____ Source _____
<b>20__</b>	\$ _____ Source _____	\$ _____ Source _____
	\$ _____ Source _____	\$ _____ Source _____
<b>20__</b>	\$ _____ Source _____	\$ _____ Source _____
	\$ _____ Source _____	\$ _____ Source _____

**6. List each consumer creditor to whom you paid \$600 or more in the past 3 months.** Do not include payments for child support, to attorneys, or to relatives or business partners.

Name of Creditor \_\_\_\_\_ Date(s) of Payment \_\_\_\_\_

Amount(s) Paid \$ \_\_\_\_\_ Amount Still Owing \$ \_\_\_\_\_

Name of Creditor \_\_\_\_\_ Date(s) of Payment \_\_\_\_\_

Amount(s) Paid \$ \_\_\_\_\_ Amount Still Owing \$ \_\_\_\_\_

Name of Creditor \_\_\_\_\_ Date(s) of Payment \_\_\_\_\_

Amount(s) Paid \$ \_\_\_\_\_ Amount Still Owing \$ \_\_\_\_\_

Name of Creditor \_\_\_\_\_ Date(s) of Payment \_\_\_\_\_

Amount(s) Paid \$ \_\_\_\_\_ Amount Still Owing \$ \_\_\_\_\_

**7. Within 1 year prior to the filing of this bankruptcy, did you make a payment on a debt you owed to a relative or business partner (insider)?**  No  Yes (complete below)

Name \_\_\_\_\_ Date(s) \_\_\_\_\_ Amount(s) \$ \_\_\_\_\_

Reason for Payment \_\_\_\_\_ Still Owing \$ \_\_\_\_\_

Name \_\_\_\_\_ Date(s) \_\_\_\_\_ Amount(s) \$ \_\_\_\_\_

Reason for Payment \_\_\_\_\_ Still Owing \$ \_\_\_\_\_

**8. Within 1 year prior to the filing date of this bankruptcy, did you transfer any property on account of a debt that benefited an insider?**  No  Yes (please complete below):

Name \_\_\_\_\_ Date(s) \_\_\_\_\_ Amount(s) \$ \_\_\_\_\_

Reason for Payment \_\_\_\_\_ Still Owing \$ \_\_\_\_\_

**9. Within 1 year prior to the filing of this bankruptcy, were you a party in any lawsuit, court action or administrative proceeding** (such as personal injury cases, small claims court actions, divorces, collection suits, paternity action, support or custody modifications, contract disputes)?  No  Yes (please complete below):

Court Name \_\_\_\_\_ Court Address \_\_\_\_\_

Case Title \_\_\_\_\_ Case No. \_\_\_\_\_

Nature of Case \_\_\_\_\_

**10. Within 1 year prior to the filing of this bankruptcy, were any of your properties or accounts repossessed, foreclosed, garnished, attached, seized or levied?**  No  Yes

Creditor Name \_\_\_\_\_ Creditor Address \_\_\_\_\_

Description of Property/Account \_\_\_\_\_

Nature of Seizure \_\_\_\_\_ Date \_\_\_\_\_

**11. Within 90 days prior to the filing of this bankruptcy, did any creditor set off any amounts from your accounts, or refuse to make a payment because you owed a debt?**  No  Yes

Creditor Name \_\_\_\_\_ Date \_\_\_\_\_ Account No. \_\_\_\_\_

Description of Action Taken \_\_\_\_\_ Amount \$ \_\_\_\_\_

**12. Within 1 year prior to the filing of this bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**  No  Yes

Assignee Name \_\_\_\_\_ Property \_\_\_\_\_

**13. Within 2 years prior to the filing of this bankruptcy, did you give any gifts with a total value of more than \$600 to any individual?**     No     Yes

Recipient Name \_\_\_\_\_ Recipient Relationship \_\_\_\_\_

Gift Description & Value: \_\_\_\_\_ Date of Gift \_\_\_\_\_

**14. Within 2 years prior to the filing of this bankruptcy, did you give any gifts with a total value of more than \$600 to any charity?**     No     Yes

Charity Name \_\_\_\_\_ Date of Contribution \_\_\_\_\_

Description of Contribution \_\_\_\_\_ Value of Contribution \$ \_\_\_\_\_

**15. Within 2 years prior to the filing of this bankruptcy, did you lose anything to theft, fire, other natural disasters, or gambling?**     No     Yes

Nature of Loss \_\_\_\_\_ Date of Loss \_\_\_\_\_

Insurance Coverage for Loss \_\_\_\_\_ Value of Loss \$ \_\_\_\_\_

**16. Within 1 year prior to the filing of this bankruptcy, did you pay anyone for advice regarding bankruptcy, or prepare a bankruptcy petition, such as attorneys, credit counseling agencies or accountants (except for me)?**     No     Yes

Professional's Name & Address \_\_\_\_\_

Date \_\_\_\_\_ Amount \$ \_\_\_\_\_

**17. Within 1 year prior to the filing of this bankruptcy, did you pay anyone who promised to deal with your creditors or make payments to your creditors?**     No     Yes

Name \_\_\_\_\_ Address \_\_\_\_\_

Date of Payment \_\_\_\_\_ Amount of Payment \$ \_\_\_\_\_

**18. Within 2 years prior to the filing of this bankruptcy, did you sell or transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs (such as granting a lien or security interest)?**     No     Yes

Name/Relationship \_\_\_\_\_ Address \_\_\_\_\_

Property Transferred \_\_\_\_\_ Value \$ \_\_\_\_\_ Date \_\_\_\_\_

**19. Within 10 years prior to the filing of this bankruptcy, did you transfer any property to a trust, asset-protection device, or similar device?**     No     Yes

Trust Name & Address \_\_\_\_\_

Description & Value of Property Transferred \_\_\_\_\_ Date \_\_\_\_\_

**20. Within 1 year prior to the filing of this bankruptcy, were any financial accounts held in your name closed, moved or transferred** (including checking, savings, money market, CDs, shares in banks, credit unions, brokerage houses, pension funds)?  No  Yes

Institution \_\_\_\_\_ Account No. \_\_\_\_\_ Date \_\_\_\_\_ Ending Balance \$ \_\_\_\_\_

**21. Within 1 year prior to filing of this bankruptcy, did you have a safe deposit box?**

Where? \_\_\_\_\_ Address \_\_\_\_\_

Contents \_\_\_\_\_ Do You Still Have Safe Deposit Box?  No  Yes

**22. Within 1 year prior to the filing of this bankruptcy, did you have a storage unit located away from your home?**  No  Yes

Storage Name \_\_\_\_\_ Address \_\_\_\_\_

Contents \_\_\_\_\_ Do You Still Have Storage Unit?  No  Yes

**23. Are you holding or storing any property that someone else owns?**  No  Yes

Owner \_\_\_\_\_ Address \_\_\_\_\_

Property Description & Location \_\_\_\_\_ Value \$ \_\_\_\_\_

**24. Has a governmental agency said you may be in violation of an environmental law?**

Nature of (Alleged) Violation \_\_\_\_\_ Gov't Agency \_\_\_\_\_ Date \_\_\_\_\_

**25. Have you notified a governmental unit of a hazardous material release?**  No  Yes

Gov't Agency \_\_\_\_\_ Date of Notice \_\_\_\_\_

**26. Have you been a party to a judicial proceeding under environmental laws?**

Court \_\_\_\_\_ Case Title & No. \_\_\_\_\_

**27. Within 4 years prior to filing this bankruptcy, did you own any business?**  No  Yes

Self-Employed  LLC or LLP  C or S Corp.  Partner  Corp Officer or Director

Business \_\_\_\_\_ Address \_\_\_\_\_

Nature of Business \_\_\_\_\_ Employer ID No. \_\_\_\_\_

**28. Within 2 years prior to filing this bankruptcy, did you give a financial statement to anyone about your business (include all financial institutions & creditors)?**  No  Yes

Name \_\_\_\_\_ Address \_\_\_\_\_ Date Issued \_\_\_\_\_

Date Completed \_\_\_\_\_ By \_\_\_\_\_