



PLEASE PROVIDE ALL OF THE FOLLOWING INFORMATION:

- 1. Complete copies of federal and state tax returns for the years 2018 and 2019.**
- 2. Paystubs or pay history to document income from all sources for the last SIX months and the current month. This information must also be provided for your spouse, even if he or she is not filing.**
- 3. If you receive any of the following information, please note the exact monthly amount here AND provide proof of income, such as a bank statement showing the deposit or an award letter:**

Social security benefits: Self _____ Spouse _____ Child _____

Child support: _____

Unemployment: Self _____ Spouse _____

Retirement income: Self _____ Spouse _____

Regular contributions from family members: _____

Food stamps: _____
- 4. Copies of any lawsuits pending against you or any divorce decree entered within the last five years.**
- 5. Certificate from approved credit counseling agency. Each person filing must complete this credit counseling class.**
- 6. Signed fee agreement. Your file will not be opened without this.**
- 7. Most recent mortgage statement(s) and/or 401k statement(s).**
- 8. Completed worksheets.**

All applicable information is required. We cannot start your case until we have this information, along with the completed worksheets, which are attached.

BANKRUPTCY WORKSHEETS

All pages of worksheets must be completed. Failure to fully complete all pages will delay the filing of your case. This information is not optional.

1. PERSONAL INFORMATION

Full name (including complete middle or maiden name): _____

ANY other name, including any business name, in the last eight (8) years? _____

Social Security Number: _____ Cell Phone Number: _____

Home Telephone Number: _____ Work Telephone Number: _____

Complete Street Address: _____

Complete Mailing Address: _____

Spouse's full name (if filing a joint bankruptcy case): _____

ANY other name, including any business name, in the last eight (8) years? _____

Social Security Number: _____ Cell Phone Number: _____

Home Telephone Number: _____ Work Telephone Number: _____

Complete Street Address: _____

Complete Mailing Address: _____

2. Marital Status Married ☐ Common Law ☐ Single ☐ Separated ☐ Widowed ☐ Divorced ☐

3. Have you and/or your spouse, or your business EVER filed for bankruptcy? _____ **If so, year filed?** _____

4. MONTHLY EXPENSES (INCLUDE TOTAL HOUSEHOLD EXPENSES FOR YOU, YOUR SPOUSE AND YOUR FAMILY EVEN IF HE OR SHE IS NOT FILING WITH YOU. PLEASE LIST THE MONTHLY AMOUNT OF ALL EXPENSES)

RENT/HOME MORTGAGE PAYMENT (first mortgage)	\$ _____
If not included above:	
Real estate taxes	\$ _____
Property, homeowner's or renter's insurance	\$ _____
Home maintenance (repairs and upkeep expenses)	\$ _____
Homeowner's association or condominium dues	\$ _____
Additional mortgage payments for your residence (such as home equity loans or second mortgages)	\$ _____
Utilities:	
Electricity and/or Gas	\$ _____
Water, sewer and garbage collection	\$ _____
Telephone, cell phone, internet, cable service and satellite	\$ _____
Security alarm Monitoring	\$ _____
Food and Housekeeping supplies	\$ _____
Childcare/Children's education costs	\$ _____ / _____
Clothing, laundry, and dry cleaning	\$ _____
Personal care products and services	\$ _____
Average Monthly Medical and Dental Expenses and Medicines (over the counter medicines, prescriptions, eyeglasses, contacts, co-pays, etc)	\$ _____
Transportation (gas, car repairs, NOT car payments)	\$ _____
Recreation, clubs, entertainment, newspapers, magazines, etc	\$ _____
Charitable Contributions	\$ _____
Insurance (if not deducted from wages or included in home Mortgage payments)	
Life	\$ _____
Health	\$ _____
Auto	\$ _____
Other _____	\$ _____
Property Taxes – vehicles, mobile home, land, house – if NOT included in mortgage	\$ _____
Installment payments:	
Vehicle	\$ _____
Vehicle	\$ _____
Other _____	\$ _____
Alimony, maintenance, and support paid to others	\$ _____
Payments for support of additional dependents not living in your home	\$ _____
Pet supplies (What kind of pets? How many?)	\$ _____

5. Please complete the following:

Circle H for husband or single male. Circle W for wife or single female. Circle J for joint.

ASSETS		DESCRIPTION	
Cash on hand			
Checking Account(s)		Name of bank(s) and/or Federal Credit Union account(s). Please list <u>all open accounts regardless of balance. Include last 4 digits of Acct#</u>	
H or W or J (circle one)		1.	
H or W or J (circle one)		2.	
H or W or J (circle one)		3.	
H or W or J (circle one)		4.	
Saving Account(s)		Name of bank(s) and/or Federal Credit Union account(s). Please list <u>all open accounts regardless of balance/Last 4 digits of Acct.#</u>	
H or W or J (circle one)		1.	
H or W or J (circle one)		2.	
H or W or J (circle one)		3.	
H or W or J (circle one)		4.	
Safe Deposit Box		Name of Bank: What do you have in your safe deposit box?	
Security deposits held by utility companies or landlords, etc.		Name and Address:	Amount:
Retirement, IRA, Pension or Profit Sharing Plans and Name of Company		Type of plan (circle one): If "Other" specify what type of account.	Balance: Loan amount, if any
H or W (circle one)		401K IRA State Retirement Other	1. 1.
H or W (circle one)		401K IRA State Retirement Other	2. 2.
H or W (circle one)		401K IRA State Retirement Other	3. 3.
H or W (circle one)		401K IRA State Retirement Other	4. 4.
Stocks, bonds, certificates of deposit and annuities		Description of Account	Value:

Life Insurance (including policies through employer): H or W (circle one) H or W (circle one) H or W (circle one) H or W (circle one)	Name of insurance company and beneficiary: 1. 2. 3. 4.	Monthly Premium if not wage deducted 1. 2. 3. 4.	Cash Surrender Value if any 1. 2. 3. 4.
Additional Assets (guns, knives, campers, RV's, pull behind trailers, stamps, coin collections, comic book collections, cds, video tapes, baseball cards, collectibles, etc.) Ammo (type of ammo and how many rounds or boxes)		Replacement Value (the price a retail merchant would charge for property of that kind considering the age and condition of the property at the time value was determined):	
House(s) and/or land deeded in your name or owned jointly with other individuals: (this includes a mobile home and land, if financed together and burial plots) How many bedrooms are in your house?	Address:	Value: (NOT THE TAX VALUE)	
Mobile Home titled in your name or titled jointly with other individuals (Year, Make and Model) How many bedrooms are in your house?	Address:	Value: (NOT THE TAX VALUE)	

Automobiles: (Year, Make and Model)	Mileage	Value
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.
5.	5.	5.
Boats: (Year, Make and Model)	Description (how long, what type of motor, trailer, etc.)	Value:
Motorcycle/4 wheeler (Year, Make and Model)	Mileage	Value:
Money owed to you / accounts receivable	Name and address of who owes you money:	Amount:
Tools, lawnmowers, yard equipment (detailed description)	Description:	Value:
Have you had any dealings with foreign banks in the last three years? NO YES		
Tools of Trade (Items used to earn your living)	Description:	Value:
Farming Equipment, Implements, Crops, Farm Supplies, Chemicals, Animals and Feed	Description:	Value:
Do you own an aircraft or have any patents, copyrights franchises, etc.	Description:	Value:

6. List any assets you and/or your spouse have sold or transferred in the last **SIX YEARS**.

Description of Property Sold and Date sold or transferred	Buyer's Name and relationship to debtor, if any. If buyer's name is not known, please put Individual and how you found this Individual	How much asset sold for / Approximate payoff of item if any

7. Including yourself, how many people live in your household full time? _____

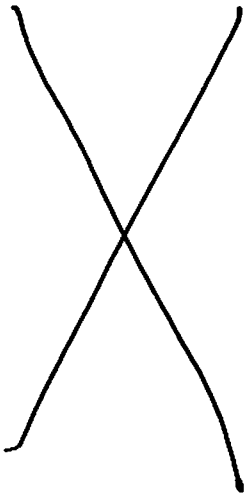
How many of those people are children? _____

Age of each child: _____ Boy or girl? _____
 _____ Boy or girl? _____
 _____ Boy or girl? _____

8. List all Bank Accounts/Financial Accounts Closed in the last 12 months.

Name of Institution and Type of Account (i.e. Checking, Savings, Retirement etc.)	Date Closed and Balance in Account on Date Account Closed.

9. HOUSEHOLD GOODS INFORMATION (Used Replacement Value means the price a retail merchant would charge for property of that kind considering the age and condition of the property at the time value was determined)

Description	Used Replacement Value
Description of clothing (jackets, coats, everyday work clothing, etc.)	
<p>Detailed description of furniture:</p> <p>1. <i>See attached</i></p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p> <p>6.</p> <p>7.</p> <p>8.</p> <p>9.</p> <p>10.</p> 	<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p> <p>6.</p> <p>7.</p> <p>8.</p> <p>9.</p> <p>10.</p>
<p>Detailed description of all jewelry (includes costume jewelry and watches)</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>Detailed description of appliances you <u>own</u>. If you</p>	<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>Value of appliances</p>

9.

Personal Property Inventory

Please fill out as completely as possible. Estimated value should be replacement value, what it would cost to replace the item with an item of similar age and condition. THIS MEANS GARAGE SALE OR THRIFT STORE VALUES!

Property Item	Description (if multiple items, describe each) <small>add additional sheets if necessary</small>	Quantity	Estimated Value
<u>Furniture</u>			
Sofas			
Chairs			
Side/Coffee/Sofa Tables			
Entertainment Center			
Bookcases			
Dining Sets			
Sideboards/China Cabinet			
Beds			
Mattresses			
Dressers/Armoires			
Nightstands			
Lamps			
Office Furnishings (Desks, Chairs, Printer Stands)			
<u>Electronics</u>			
Televisions			
DVD Players			
VCR Players			
Stereo Equipment			
Speakers			
Telephone Systems			
Mobile Telephones			
Computers			

Property Item	Description (if multiple items, describe each) add additional sheets if necessary	Quantity	Estimated Value
Printers			
Appliances			
Washing Machine			
Dryer			
Refrigerator			
Freezer			
Microwave			
<u>Miscellaneous Items</u>			
Dishes/China			
Cooking Equipment			
Silverware			
Linens Sheets/Towels/Blankets			
<u>Sporting Goods</u>			
Bicycles			
Camping Gear			
Fishing Gear			
Golf Clubs			
Miscellaneous sporting equipment			
<u>Collectibles</u>			
Stamps/Coins			
Figurines			
Sports Memorabilia			
Comic Books			
<u>Miscellaneous Items</u>			
Music Equipment			
CD's/DVD's/Music Collections			

Property Item	Description (if multiple items, describe each) add additional sheets if necessary	Quantity	Estimated Value
Clothing (give total value)			
Jewelry			
Other			

10. Are you obligated to any contracts to rent or lease anything? Yes OR No (this includes cell phones)

If yes, provide name and address of who you rent from _____

How long is your lease? _____ How many months remaining? _____

Please include any contract you have with cell phone companies.

11. Are you court ordered to pay child support or alimony? Yes OR No

If yes, provide the name and address of the person you pay support to (even if the support is collected through the court

system. _____