

BANKRUPTCY WORKBOOK

Please read the following carefully and completely, and provide all information requested. If you have any questions while filling out the workbook, please give us a call and we will help you.

Filling out this workbook is the most difficult and important responsibility you will have during the entire bankruptcy process. We must have ALL the information requested in order to prepare the paperwork to file with the court and commence your case, so please take the time to do this carefully and completely.

OTHER INFORMATION NEEDED

In addition to the information in the workbook, the following should also be provided with the workbook:

1. Your last two tax returns, including all schedules.
2. Proof of income for the previous six calendar months. If you are employed, that will be your pay stubs. If you are self-employed, I will need profit and loss statements for the six-month period. If you are receiving Social Security benefits, unemployment compensation, disability payments, or any other benefits, I will need your award letter or other proof of the amount of such payments. If you are filing a Chapter 13 and will be relying upon financial help from relatives or friends to make your plan feasible, I will need a letter from such people stating that they will be providing you with a specific amount of money per month.
3. Pay stubs for the 60 days prior to the case being filed. While this may include some of the proof of income in paragraph 2, you will need to continue collecting any pay stubs you receive up until the day we file your case. If you are filing a Chapter 13 case, you will also need to bring any pay stubs you receive after the case is filed to the meeting with the trustee.
4. The trustee may request other information from you at the time of our meeting. If so, you must provide that information to me promptly so I can pass it along to the trustee.
5. You must bring your driver's license and Social Security card to the trustee meeting, so be sure you have both of those documents available.

SECTION 1 – BASIC INFORMATION

Name: _____

Address: _____

County: _____

Length of time at this address: _____

If you have a different mailing address, please list: _____

Telephone numbers: Home: _____ Work: _____

Cell: _____

Social Security Number: _____

Have you used any other names in the past six years? If so, list other names:

Spouse's Personal Information

Name: _____

Address: _____

County: _____

Length of time at this address: _____

If you have a different mailing address, please list: _____

Telephone numbers: Home: _____ Work: _____

Cell: _____

Social Security Number: _____

Have you used any other names in the past six years? If so, list other names:

Prior/Pending Bankruptcy Cases

Has a bankruptcy case been filed by you or against you in the last 8 years? _____

If yes, in which district and state was the case filed? _____

Case number: _____ Date filed: _____

Are there currently any bankruptcy cases pending against you, your business, your spouse, or your spouse's business? _____

If yes, name of debtor: _____

Relationship to you: _____

In which district and state was the case filed? _____

Case number: _____ Date filed: _____

SECTION 2 – REAL ESTATE

List all real estate which you own, either individually or with another person, even if you still owe money on the property. If you own more than one piece of real estate, please let us know so we can provide you with additional forms for each piece of additional property.

Also, if you own a mobile home and make separate payments on the mobile home and on the land, list each separately.

PLEASE INCLUDE A COPY OF YOUR LAST STATEMENT FROM YOUR MORTGAGE COMPANY, AND ANY FORECLOSURE LETTERS OR ACCELERATION LETTERS FROM YOUR MORTGAGE COMPANY AND/OR ITS ATTORNEYS.

Address and description of property: (Example: “3 BR/2BA single-family residence at 1234 Main Street, City, County, State; Meadowbrook Addition, Block 33, Lot 17” OR “1992 Fleetwood double-wide mobile home on 1 acre at Route 3, Box 77, City, County, State.”)

Owner (individual debtor, husband, wife, joint, or community): _____

Market value: \$ _____ Amount owed: \$ _____ Monthly payment \$ _____

Mortgage holder: _____ Interest rate: _____%

Address: _____ Date loan was made: _____

_____ Loan Term: _____ years

Account number: _____

Are you behind on your mortgage payments? _____ If so, how much is the arrearage (amount you are behind)? \$ _____

Has a foreclosure action been filed against this property? _____ If so, please provide us with any papers that have been served on you.

Date of foreclosure sale: _____ **WE MUST FILE YOUR CASE PRIOR TO THIS DATE TO STOP THE FORECLOSURE.**

Do you owe property taxes on your real estate? _____ If so, please provide copies of the property tax statements.

SECTION 3 – PERSONAL PROPERTY

If you own any property in the following categories, fill in the requested information. If you need additional space, write on the back of the sheet or attach additional pages.

1. **Cash on hand:** \$ _____

2. **Bank accounts.** For each account, list the following:

a. Name of bank/credit union: _____

Address: _____

Type of account: _____

Account number: _____

Balance as of filing date: _____

b. Name of bank/credit union: _____

Address: _____

Type of account: _____

Account number: _____

Balance as of filing date: _____

3. If anyone is holding a **security deposit** for you, such as a utility company, landlord, etc., list the following:

a. Name: _____

Address: _____

Type of deposit: _____

Account number, if any: _____

Amount of deposit: _____

b. Name: _____
 Address: _____

Type of deposit: _____

Account number, if any: _____

Amount of deposit: _____

4. **Household goods, including furniture, audio and video equipment, and computer equipment.**

When completing this section, list the contents of each room of your house, your garage, any storage buildings, etc. For the value, use garage sale value, i.e., what you would probably receive if you tried to sell the item in a garage sale.

If you owe money on any of the items listed, please indicate who you owe. You must list all property, whether you owe money on it or not.

<u>Example:</u>	<u>Description:</u>	<u>Market value:</u>	<u>Who owed:</u>
	Couch	\$100.00	Sears
	Recliner	\$50.00	N/A
	Queen bedroom suite	\$200.00	Rooms to Go
	Refrigerator	\$100.00	N/A

<u>Description:</u>	<u>Market value:</u>	<u>Who owed:</u>
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5. **Books, pictures, art objects, records, compact discs, collectibles**

You do not need to list each book, picture, etc., individually. Just list in groups, such as “Miscellaneous books \$200, miscellaneous pictures \$100, miscellaneous art objects \$50, 20 records \$20, 50 compact discs \$100,” etc.

Description:

Market value:

6. **Clothing**

You do not have to list each individual piece of clothing. Just list “Miscellaneous man’s clothing, miscellaneous woman’s clothing”, etc., and give the total market value.

Description:

Market value:

7. **Jewelry**

If you owe money on any furs or jewelry, list the creditor.

Description:

Market value:

Who owed:

8. **Sports, photographic, hobby equipment, firearms**

If you owe money on any of these items, list the creditor:

Description:

Market value:

Who owed:

9. **Interest in insurance policies – specify refund or cancellation value.** If you have only term life insurance, which has no market value, please list the benefit amount.

Description:

Market value:

10. **Annuities**

Description:

Market value:

11. **Interests in pension or profit sharing plans, including IRA and 401k accounts**

Description:

Market value:

12. **Stock and interests in incorporated/unincorporated business**

Description:

Market value:

13. **Interests in partnerships/joint ventures**

Description:

Market value:

14. **Bonds**

Description:

Market value:

15. **Accounts receivable**

Description:

Market value:

16. **Alimony/family support to which you are entitled**

Description:

Market value:

17. **Other debts owed to you, including tax refunds**

Description:

Market value:

18. **Equitable or future interests or life estates**

Description:

Market value:

19. **Interests in estate of decedent or life insurance plan or trust**

Description:

Market value:

20. **Other claims of any kind, including lawsuits you could bring against others.** If you do not list such a claim or lawsuit, you may lose the ability to pursue it later.

Description:

Market value:

21. **Patents, copyrights, other intellectual property**

Description:

Market value:

22. **Licenses or franchises**

Description:

Market value:

23. **Boats, motors and accessories**

Description:

Market value:

Who owed:

24. **Aircraft and accessories**

Description:

Market value:

Who owed:

25. **Office equipment and supplies used for business**

Description:

Market value:

Who owed:

26. **Machinery, fixtures, etc., used for business**

Description:

Market value:

Who owed:

27. **Inventory**

Description:

Market value:

Who owed:

28. **Animals**

Description:

Market value:

Who owed:

29. **Crops, growing or harvested**

Description:

Market value:

Who owed:

30. **Farming equipment and implements**

Description:

Market value:

Who owed:

31. **Farm supplies, chemicals, feed**

Description:

Market value:

Who owed:

32. **Other personal property of any kind not listed above**

Description:

Market value:

Who owed:

33. **Automobiles, trucks, trailers and accessories**

When describing each vehicle, please include a full description – Year; make; model; 2-door, 4-door, coupe, "LS," "LE", etc.; any damage that would affect the value of the vehicle; and the mileage.

Vehicle 1 Description:

Mileage _____

Creditor: Name: _____

Address: _____

Account No.: _____

Balance: _____

Date purchased: _____

Interest Rate: _____% Loan Term: _____ months

Vehicle 2 Description:

Mileage _____

Creditor: Name: _____

Address: _____

Account No.: _____

Balance: _____

Date purchased: _____

Interest Rate: _____% Loan Term: _____ months

SECTION 4 – SECURED DEBTS

For each secured creditor other than your mortgage and vehicles, state the following:

PLEASE INCLUDE THE MOST RECENT STATEMENT YOU HAVE RECEIVED FROM THIS CREDITOR WITH YOUR WORKBOOK. YOU DO NOT NEED TO FILL IN THE FOLLOWING INFORMATION IF IT IS PROVIDED ON THE STATEMENT.

1. Name of creditor: _____
Address: _____
Account number: _____
Account balance: _____
Description of property: _____
When was property purchased? _____
Are your payments current? _____
If not, what is the arrearage? _____

2. Name of creditor: _____
Address: _____
Account number: _____
Account balance: _____
Description of property: _____
When was property purchased? _____
Are your payments current? _____
If not, what is the arrearage? _____

3. Name of creditor: _____
Address: _____
Account number: _____
Account balance: _____
Description of property: _____
When was property purchased? _____
Are your payments current? _____
If not, what is the arrearage? _____
4. Name of creditor: _____
Address: _____
Account number: _____
Account balance: _____
Description of property: _____
When was property purchased? _____
Are your payments current? _____
If not, what is the arrearage? _____

FAILURE TO MAINTAIN INSURANCE COVERAGE ON COLLATERAL WILL GIVE YOUR CREDITORS GROUNDS FOR HAVING THE STAY LIFTED, AND YOU MAY LOSE YOUR PROPERTY. IF YOUR INSURANCE LAPSES, THE CREDITOR WILL BE INFORMED, SO DO NOT ALLOW ANY LAPSES IN YOUR INSURANCE COVERAGE.

SECTION 5 – PRIORITY AND SPECIAL CLASS DEBTS

Some debts cannot be discharged in bankruptcy, such as taxes, child support, alimony, criminal fines, student loans, wages owed to others, and certain other debts. Please list all such debts below, and ask us if you have any questions as to whether any of your debts fall into these categories:

Income Taxes: INTERNAL REVENUE SERVICE
Amount owed: _____
Date(s) tax became due: _____

Student loans: Creditor: _____
Address: _____

Account number: _____
Amount owed: _____
Date first payment became due: _____
Have you had any forbearances, extensions, etc., on this loan? _____
If so, what were the time periods? _____

Child support/alimony/maintenance:

Creditor: _____
Address: _____

Account number: _____
Amount owed: _____
Date debt became due: _____

Other: Type of debt: _____
Creditor: _____
Address: _____

Account number: _____
Amount owed: _____
Date debt became due: _____

SECTION 6 – UNSECURED DEBTS

List below all unsecured debts, such as signature loans, personal loans, credit cards, medical bills, unpaid utilities, unpaid rent, and all other unpaid bills not listed in Section 4 or 5 above. For each, please complete all the following information. If you need additional space, write on the back or attach additional sheets.

INCLUDE YOUR MOST RECENT STATEMENT FROM YOUR CREDITOR. YOU DO NOT NEED TO FILL IN THE FOLLOWING INFORMATION IF IT IS PROVIDED ON THE STATEMENT.

1. Creditor: _____

- Address: _____

- _____

- Account No: _____

- Balance: _____

- Date account was opened: _____

2. Creditor: _____

- Address: _____

- _____

- Account No: _____

- Balance: _____

- Date account was opened: _____

3. Creditor: _____

- Address: _____

- _____

- Account No: _____

- Balance: _____

- Date account was opened: _____

4. Creditor: _____
Address: _____
Account No: _____
Balance: _____
Date account was opened: _____

5. Creditor: _____
Address: _____
Account No: _____
Balance: _____
Date account was opened: _____

6. Creditor: _____
Address: _____
Account No: _____
Balance: _____
Date account was opened: _____

7. Creditor: _____
Address: _____
Account No: _____
Balance: _____
Date account was opened: _____

8. Creditor: _____
Address: _____
Account No: _____
Balance: _____
Date account was opened: _____

9. Creditor: _____
Address: _____
Account No: _____
Balance: _____
Date account was opened: _____

10. Creditor: _____
Address: _____
Account No: _____
Balance: _____
Date account was opened: _____

11. Creditor: _____
Address: _____
Account No: _____
Balance: _____
Date account was opened: _____

SECTION 7 – UNEXPIRED LEASES AND CONTRACTS

List below any leases or contracts you are a party to, such as cell phone contracts, home leases, apartment leases, office leases, auto leases, etc.

1. Nature and description of contract/lease: _____

Name and address of other party or parties: _____

Date the contract/lease expires: _____

Amount due under contract/lease: _____

Do you wish to continue this contract/lease? _____

2. Nature and description of contract/lease: _____

Name and address of other party or parties: _____

Date that contract/lease expires: _____

Amount due under contract/lease: _____

Do you wish to continue this contract/lease? _____

SECTION 8 – MARITAL STATUS, DEPENDENTS, CURRENT INCOME

Marital status: _____

Dependents: Name: _____
Age: _____
Relationship to Debtor: _____

Name: _____
Age: _____
Relationship to Debtor: _____

Name: _____
Age: _____
Relationship to Debtor: _____

Name: _____
Age: _____
Relationship to Debtor: _____

Income of Debtor

Occupation: _____

Employer: _____

Address: _____

How long have you been employed there? _____

How often do you get paid?

- Once a week
- Every two weeks
- Twice a month
- Once a month
- Other _____

PLEASE INCLUDE COPIES OF ALL PAY ADVICES OR OTHER EVIDENCE OF INCOME RECEIVED WITHIN THE LAST SIX MONTHS. THIS WILL BE FOR MONTHS _____ THROUGH _____.

What is the gross amount of your paycheck, before taxes and other deductions are taken out? \$ _____

Do you receive overtime pay? If so, how much per month? \$ _____

How much is deducted from each check for taxes, Medicare and Social Security (FICA)? \$ _____

How much is taken out for insurance? \$ _____

How much is taken out for union dues? \$ _____

How much is taken out for other deductions, and what are they?

Description: _____ \$ _____
_____ \$ _____

Do you receive income from business operations other than from your regular employment listed above? _____ If so, what is the business and how much do you receive per month?

Description _____ \$ _____

Do you receive income from real estate property? \$ _____

Do you receive interest or dividends? \$ _____

Do you receive alimony or family support payments for your use or for the care of your dependents? \$ _____

Do you receive Social Security, disability, unemployment or other forms of monetary government assistance? \$ _____

Do you receive retirement or pension money? \$ _____

Do you have any other sources of income not listed?

Description _____ \$ _____

Are you expecting any increase or decrease in income of more than 10% in the next year? _____
If so, explain: _____

Income of Joint Debtor

Occupation: _____

Employer: _____

Address: _____

How long have you been employed there? _____

How often do you get paid?

- Once a week
- Every two weeks
- Twice a month
- Once a month
- Other _____

PLEASE INCLUDE COPIES OF ALL PAY ADVICES OR OTHER EVIDENCE OF INCOME RECEIVED WITHIN THE LAST SIX MONTHS. THIS WILL BE FOR MONTHS _____ THROUGH _____.

What is the gross amount of your paycheck, before taxes and other deductions are taken out? \$ _____

Do you receive overtime pay? If so, how much per month? \$ _____

How much is deducted from each check for taxes, Medicare and Social Security (FICA)? \$ _____

How much is taken out for insurance? \$ _____

How much is taken out for union dues? \$ _____

How much is taken out for other deductions, and what are they?

Description: _____ \$ _____
_____ \$ _____

Do you receive income from business operations other than from your regular employment listed above? _____ If so, what is the business and how much do you receive per month?

Description _____ \$ _____

Do you receive income from real estate property? \$ _____

Do you receive interest or dividends? \$ _____

Do you receive alimony or family support payments for your use or for the care of your dependents? \$ _____

Do you receive Social Security, disability, unemployment or other forms of monetary government assistance? \$ _____

Do you receive retirement or pension money? \$ _____

Do you have any other sources of income not listed?

Description _____ \$ _____

Are you expecting any increase or decrease in income of more than 10% in the next year? _____

If so, explain: _____

SECTION 9 – CURRENT EXPENSES

If you and your spouse maintain separate households, fill out separate sheets for each household.

Please calculate your expenses on a MONTHLY basis. For things such as utilities that fluctuate month to month, calculate a monthly average.

- | | | | |
|-----|--|-------|----------|
| 1. | Rent or mortgage payment | | \$ _____ |
| | Does this amount include real estate taxes? | _____ | |
| | Does this amount include property insurance? | _____ | |
| 2. | Electricity and heating (natural gas, propane, etc.) | | \$ _____ |
| 3. | Water and sewage | | \$ _____ |
| 4. | Telephone service, including long distance | | \$ _____ |
| 5. | Other utility bills (cable, cell phone, pager, garbage pickup, etc.) | | |
| | Description: _____ | | \$ _____ |
| | _____ | | \$ _____ |
| | _____ | | \$ _____ |
| 6. | Home maintenance, including repairs and general upkeep | | \$ _____ |
| 7. | Food | | \$ _____ |
| 8. | Clothing | | \$ _____ |
| 9. | Laundry and dry cleaning | | \$ _____ |
| 10. | Medical and dental expenses | | \$ _____ |
| 11. | Transportation (including gasoline, oil, maintenance, but not including car payments or insurance) | | \$ _____ |
| 12. | Entertainment, recreation, newspapers, magazines | | \$ _____ |
| 13. | Charitable contributions | | \$ _____ |

14. Insurance not deducted from paycheck:
- a. Homeowner's or renter's insurance \$ _____
 - b. Life insurance \$ _____
 - c. Health insurance \$ _____
 - d. Auto insurance \$ _____
 - e. Other insurance _____ \$ _____
15. Taxes not deducted from paycheck \$ _____
16. Installment payments for car, furniture, etc. (specify)
 (Note: Do not list if your payments are to be included
 in a Chapter 13 Payment Plan)
- _____ \$ _____
 _____ \$ _____
 _____ \$ _____
17. Alimony, maintenance, support paid to others (specify)
- _____ \$ _____
 _____ \$ _____
 _____ \$ _____
18. Payments for support of dependents not living at home \$ _____
19. Expenses from operation of business \$ _____
20. Other expenses not listed above (such as day care,
 work expenses, etc.)
- _____ \$ _____
 _____ \$ _____
 _____ \$ _____

IMPORTANT: Be sure to list ALL expenses. Look at your checkbook and other records to be sure that you haven't left something out. In a Chapter 13 case, your monthly payment is based on the difference between your income and expenses, and you may end up paying a larger monthly plan payment than you can afford if you do not list all your expenses. In Chapter 7 cases, if it appears that you have excess income, you may be disqualified from discharging all of your debts. So, please take the time to make sure your expenses are accurately listed.

We may have to make adjustments to your expenses to meet the guidelines of the trustee and the Bankruptcy Code. We will discuss with you any expenses that seem to be unusual, and work with you on making any necessary adjustments.

- b. Have you made payments within the last year to any creditors who were “insiders” (relatives, business partners and their relatives, your corporation, or your affiliates)? If so, state the following:

<u>Name and address of creditor & relationship to you</u>	<u>Dates of payments</u>	<u>Amounts</u>	<u>Amount still owing</u>
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4. a. Have any lawsuits or administrative proceedings been filed against you within the last year? If so, provide us with the papers you were served, or give us the following information as to each such suit or proceeding:

<u>Caption of suit & case number</u>	<u>Nature of proceeding</u>	<u>Court or agency and location</u>	<u>Case status</u>
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- b. Has any of your property been garnished, seized or attached within the last year? If so, please give us the following information:

<u>Name and address of creditor for whom the property was taken</u>	<u>Date of seizure</u>	<u>Description and value of property</u>
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5. If any of your property has been repossessed, sold at a foreclosure sale, transferred in lieu of foreclosure, or returned to the seller within the past year, please give us the following information:

<u>Name and address of creditor</u>	<u>Date of repossession, foreclosure, transfer or return</u>	<u>Description and value of property</u>
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6. a. If you have assigned any of your property for the benefit of creditors within the past 120 days, please give us the following information:

<u>Name and address of assignee</u>	<u>Date of assignment</u>	<u>Terms of assignment/settlement</u>
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- b. If any of your property has been in the hands of a custodian, receiver, or court-appointed official within the last year, please give us the following information:

<u>Name and address of custodian</u>	<u>Name & location of court, case title & case number</u>	<u>Date of order</u>	<u>Description & value of property</u>
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7. If, during the past year, you have given gifts of more than \$100 to non-family members, gifts of more than \$200 to individual family members, or charitable contributions of more than \$100 per recipient, please provide the following information:

<u>Name and address of recipient</u>	<u>Relationship to you, if any</u>	<u>Date of gift</u>	<u>Description and value of gift</u>
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8. If you have suffered any losses from fire, theft, gambling, or other casualty within the past year, please give us the following information:

<u>Description and value of property</u>	<u>Description of circumstances and amount covered by insurance, if any</u>	<u>Date of loss</u>
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9. List all payments made for debt counseling during the past year, including attorney's fees. NOTE: We will list the payments made by you to our law firm and the credit counseling provider who sends us the certificate of completion. However, if you consulted any other debt counseling service or attorney before coming to us and paid them any money, please give us the following information:

<u>Name and address of payee</u>	<u>Date of payment</u>	<u>Name of person who paid, if not you</u>	<u>Amount of money/type and value of property</u>
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10. If you have transferred any property to another person during the past year, please give us the following information:

<u>Name and address of transferee and relationship to you</u>	<u>Date of transfer</u>	<u>Description of property transferred and value received</u>
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11. If you have closed any financial accounts or sold or transferred any financial instruments during the past year, please give us the following information:

<u>Name and address of institution</u>	<u>Type and number of account and final balance</u>	<u>Amount and date of sale or closing</u>
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12. Do you have a safe deposit box? If so, give us the following information.

<u>Name and address of bank or depository</u>	<u>Name and address of those with access to box or depository</u>	<u>Description of contents</u>	<u>Date of transfer, if any</u>
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13. Has anyone made a setoff against a debt of yours within the past 90 days? Example: If you have a car loan at a bank where you also have a savings account, a setoff would have occurred if the bank took money out of your savings account to make up for a late or missed car payment. If that has occurred, please give us the following information:

<u>Name and address of creditor</u>	<u>Date of setoff</u>	<u>Amount of setoff</u>
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14. If you are holding or controlling property that is owned by someone else, please give us the following information:

<u>Name and address of owner</u>	<u>Description and value of property</u>	<u>Location of property</u>
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15. Please list any other addresses you have had during the past two years, other than your present address:

<u>Address</u>	<u>Your name at that time</u>	<u>Date of occupancy</u>
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