



## WARE LAW, PC

### **BANKRUPTCY QUESTIONNAIRE**

#### **Personal information**

Your Name (as it appears on Soc. Sec. Card): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Maiden/former/other names: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Marital status (single, married, divorced): \_\_\_\_\_ If divorced, date of divorce: \_\_\_\_\_

Your address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Do you rent or own your residence? \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Spouse's Date of birth: \_\_\_\_\_

Spouse's maiden/former name: \_\_\_\_\_

Spouse's social security number: \_\_\_\_\_

Spouse's home address and phone: \_\_\_\_\_

If less than 3 years at current address, please list previous addresses, beginning with the most recent:

Address # 1: \_\_\_\_\_

Dates you lived there: \_\_\_\_\_

Address # 2: \_\_\_\_\_

Dates you lived there: \_\_\_\_\_

# YOUR INCOME

## (1) SOURCES OF INCOME OTHER THAN WAGES

Do you have any sources of income other than wages? Examples might include: disability income; pension income; income from social security; rental income; income from a small business; income from a trust; etc.

If so, please list here:

Source of Income	Monthly Amount
_____	_____

Source of Income	Monthly Amount
_____	_____

Source of Income	Monthly Amount
_____	_____

## (2) INCOME FROM WAGES

YOU

SPOUSE

Job title/occupation:

\_\_\_\_\_

\_\_\_\_\_

Employer:

\_\_\_\_\_

\_\_\_\_\_

How long there:

\_\_\_\_\_

\_\_\_\_\_

Payroll address:

\_\_\_\_\_

\_\_\_\_\_

City, state, zip

\_\_\_\_\_

\_\_\_\_\_

Payroll office phone #:

\_\_\_\_\_

\_\_\_\_\_

Date of next paycheck

\_\_\_\_\_

\_\_\_\_\_

Annual income/salary

\_\_\_\_\_

\_\_\_\_\_

## **PAY STUBS**

**BANKRUPTCY LAW REQUIRES US TO ANALYZE THE LAST SIX MONTHS OF HOUSEHOLD INCOME.**

**PLEASE PHOTOCOPY EACH PAY STUB FOR THE PAST SIX MONTHS AND ATTACH TO THIS SHEET.**

**IF YOU ARE MARRIED, PLEASE ATTACH PAY STUBS FOR YOUR SPOUSE, EVEN IF SHE OR HE IS NOT FILING BANKRUPTCY.**

## YOUR DEPENDENTS

### Children & Step-children

Name	Age	Relationship	Does child live with you?	Amount of child support received

Do you pay child support or alimony for / to anyone? If so, please list amount and name and address of recipient.

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Do you pay expenses of anyone who doesn't live with you? Examples might include extended family members, children at college, family members in nursing homes. If so, please list monthly amount, what kind of expenses, and name of recipient.

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Who lives in your household with you? List relationship. Also list any contributions they make to the household bills. (Example: "son pays for household internet bill.")

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## YOUR MONTHLY EXPENSES

Please give all information below in terms of monthly numbers. For example, if you pay your car insurance annually and it is \$600.00, the correct monthly figure would be \$50.00 / month.

	<b>Household expenses</b>	<b>Notes</b>
Rent/mortgage payments	_____	_____
Electric bill	_____	_____
Gas bill	_____	_____
Water/sewer	_____	_____
Land line (phone)	_____	_____
Cell phone bill #1	_____	_____
Cell phone bill #2	_____	_____
Cell phone #3	_____	_____
Internet service	_____	_____
Cable TV	_____	_____
Home maintenance	_____	_____
Food	_____	_____
Clothing	_____	_____
Laundry/dry cleaning	_____	_____
Medical/dental (deductibles and non-reimbursed only)	_____	_____
Gasoline/bus fare	_____	_____

Oil changes/tires	_____	_____
Charity/church	_____	_____
Entertainment	_____	_____
Personal property insurance	_____	_____
Real property insurance	_____	_____
Life insurance	_____	_____
Disability insurance	_____	_____
Long term care insurance	_____	_____
Health insurance ( <b>not</b> deducted from pay)	_____	_____
Auto insurance	_____	_____
Non-payroll taxes	_____	_____
County property tax (if <u>not</u> escrowed)	_____	_____
Car/truck payment #1	_____	_____
Car/truck payment #2	_____	_____
Alimony paid	_____	_____
Child support paid	_____	_____
Education expenses (child must be <18)	_____	_____
Child care expenses (receipts needed)	_____	_____
Care for elderly or disabled	_____	_____

Student loan payments

\_\_\_\_\_

\_\_\_\_\_

Other expense  
(specify the expense)

\_\_\_\_\_

\_\_\_\_\_

Other expense  
(specify the expense)

\_\_\_\_\_

\_\_\_\_\_

## YOUR DEBTS

We will get information about many of your debts directly from the credit reporting bureaus.

But, you might have some debts that do not appear on your credit report. On the following pages, please list all debts that do not appear on your credit report.

If you are unsure which debts appear on your credit reports, please review your credit report. You can get free copies at [annualcreditreport.com](http://annualcreditreport.com).

### **IT IS VERY IMPORTANT THAT YOU LIST ALL DEBTS THAT DO NOT APPEAR ON YOUR CREDIT REPORT.**

You are the only source of information we have for those debts; not listing them can mean these debts will not be discharged in your bankruptcy.

Examples of debts that do not typically appear on a credit report are:

1. Medical services
2. Dental services
3. Other professional services (attorneys, accountants, etc)
4. Old utility accounts
5. Old apartment leases
6. Old car repossessions
7. Business credit cards that you personally guaranteed
8. Past due taxes of any kind
9. Judgments against you
10. Court cases filed against you
11. Past due childcare expenses
12. Loans from friends and family members (yes, you must list these)
13. Home repair or renovation contractors
14. Leases you co-signed for other people
15. Loans you co-signed for other people
16. Credit accounts you co-signed
17. Past due alimony or child support
18. Many other examples- list the debt if in doubt



## DEBTS NOT APPEARING ON YOUR CREDIT REPORT

\*\*\*WHEN LISTING THE INFORMATION BELOW, PLEASE DO NOT SKIP ANY SPACES. YOUR DEBT CANNOT BE DISCHARGED IF YOU DO NOT PROVIDE ALL OF THE INFORMATION BELOW.\*\*\*

IF YOU NEED ADDITIONAL ROOM TO LIST YOUR CREDITORS, PLEASE PRINT EXTRA COPIES OF THIS SHEET

PLEASE DO NOT LIST CREDITORS THAT DO APPEAR ON YOUR CREDIT REPORT.

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Name of creditor \_\_\_\_\_

CORRESPONDENCE address of creditor (please do NOT list the billing address):

\_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Amount of debt \_\_\_\_\_

Do you dispute all or a part of the debt amount? If so, on what grounds?

\_\_\_\_\_

Has this debt been sold or referred to a collection agency or debt buyer? If so, please list name and address of agency or debt buyer here: \_\_\_\_\_

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Name of creditor \_\_\_\_\_

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\_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Amount of debt \_\_\_\_\_

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Amount of debt \_\_\_\_\_

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\_\_\_\_\_

Has this debt been sold or referred to a collection agency or debt buyer? If so, please list name and address of agency or debt buyer here: \_\_\_\_\_

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## EMERGENCY SITUATIONS

Are you currently facing any of the following? If so, please give details AND attach all documents related to the situation. Examples: bank levy documents, wage garnishment notices from your HR department, etc.

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Wage garnishment? Please list contact information for (1) the party who is garnishing you AND (2) for your employer's garnishment department.

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Bank levy? \_\_\_\_\_

Judgment? \_\_\_\_\_

Lawsuit? \_\_\_\_\_

Foreclosure? \_\_\_\_\_

Repossession? \_\_\_\_\_

Liens against your real or personal property?  
\_\_\_\_\_

Do you owe past due taxes of any kind?  
\_\_\_\_\_

Are you behind in tax filings? If so, for what tax years do you need to file?  
\_\_\_\_\_

Do you anticipate divorcing the near future? \_\_\_\_\_

Do you anticipate moving or needing to buy a new car in the next year?  
\_\_\_\_\_

Has the IRS, state franchise tax board, or any other taxing entity ever advised you that a tax lien has been filed against you? \_\_\_\_\_

## YOUR ASSETS

Please list any real estate in your name.

Property address	Titled in whose name?	Date purchased	Purchase price	Value now	Total debt owed on property

Please list any cars or trucks you own.

Year/make/model	Mileage	In whose name	Date purchased	Name of lender (if you have a car loan)

Please list any bank accounts YOUR NAME IS ON. List account even if you do not have control over the account (Example: your name is on an elderly parent's account.)

Name of bank / type of account	Last 4 digits of acct #	In whose name	Current balance	Any other loans or credit cards with this lender?

Please list any pension, 401(k) or profit-sharing programs in which you participate

Name of financial institution	Type of plan	In whose name	Are you still contributing?	Current balance	Any loans against this plan?

Other assets not yet described (i.e. boats, stocks/bonds, antiques, musical instruments, collections, insurance policies with cash value, guns, sporting equipment, jewelry, etc.)

Asset description	Current value	Who owns this asset?	Has asset been pledged as collateral for a loan?

Are you anticipating a tax refund – if so, how much? \_\_\_\_\_

Are you currently involved in a car accident claim, workers' compensation claim or any other claim that may result in money damages payable to you?  
\_\_\_\_\_

Do you have the right to collect money or property from any person for any reason?  
\_\_\_\_\_

Do you own any one item of furniture or electronics worth more than \$650.00? If so, please describe and estimate value. \_\_\_\_\_

What do you estimate is the total value of all your furniture and electronics combined? Please estimate using what you could get for the furniture at a yard sale. \_\_\_\_\_

Do you own any article of clothing worth more than \$650.00? If so, describe and estimate a value.  
\_\_\_\_\_

What do you estimate (using "yard sale value") is total value of all your clothing combined? \_\_\_\_\_  
\_\_\_\_\_

## RECENT ACTIVITY

<b>During the last 90 days, have you done any of the following</b>	<b>Yes/No</b>	<b>Name of lender/transferee</b>	<b>Amount borrowed w/in last 60 days</b>
Used credit cards			
Taken cash advances			
Taken out any new loans			
Gave away or sold any property worth more than \$600			

<b>Have you done any of the following</b>	<b>Yes/No</b>	<b>Name of person paid</b>	<b>Amount</b>
Paid back a relative or business associate within last 365 days (1yr)			
Issued payment to anyone for more than \$650 within last 90 days			

**Have you ever filed a Chapter 7 or a Chapter 13 bankruptcy before?**

<b>Type of bankruptcy (Ch. 7 or Ch. 13)</b>	<b>Date filed</b>	<b>Was case completed or dismissed?</b>	<b>When was case closed by Court</b>	<b>Case number</b>	<b>Former BK lawyer</b>

## STATEMENT OF FINANCIAL AFFAIRS

1. In the past two years, did you give any gifts with a total value of more than \$600.00 per person? If “yes,” please list.  
\_\_\_\_\_
2. In the past two years, did you make any charitable contributions with a total value of more than \$600.00 per charity? \_\_\_\_\_
3. In the past year, have you lost anything because of theft, fire, disaster, or gambling? \_\_\_\_\_
4. In the past year, have you paid (or has anyone paid for you) fees related to bankruptcy services or debt settlement services (other than fees you paid to our office)? \_\_\_\_\_
5. Have you sold anything worth more than \$600.00 in the past four years? If so, please list here. Examples might include selling your house, selling a car, etc.  
\_\_\_\_\_
6. Have you ever created a trust or transferred property to a trust? \_\_\_\_\_ If “yes,” please give name of trust and date trust was created:  
\_\_\_\_\_
7. Are you the beneficiary of any trusts? \_\_\_\_\_ If “yes,” please give name of trust and date trust was created: \_\_\_\_\_
8. Are you the trustee of any trusts? \_\_\_\_\_
9. Have you closed any investment or bank accounts in your name in the past year? \_\_\_\_\_ If “yes,” please list name of bank, last 4 digits of account number, and date account closed.  
\_\_\_\_\_
10. Have you had a safe deposit box in the past year? \_\_\_\_\_ If “yes,” list address where located: \_\_\_\_\_
11. Have you had any property in storage in the past year? \_\_\_\_\_ If “yes,” list address where located: \_\_\_\_\_
12. Are you holding or storing any property or assets belonging to someone else? \_\_\_\_\_ If “yes,” please describe \_\_\_\_\_
13. In the past four years, have you owned or operated a business of any kind? \_\_\_\_\_ If “yes,” list name and address of business \_\_\_\_\_

## **DISCLOSURE CERTIFICATE**

I acknowledge that my attorneys rely on the information provided in this questionnaire to assist and advise me, and that it is my responsibility to provide my attorneys with a full, complete and accurate financial disclosure.

I further agree to update my attorney in writing if I need to supplement or correct any of my responses in this questionnaire. If I update this questionnaire by email, the email must be acknowledged by reply email by my attorney, otherwise I will not assume that my attorney received the update.

I further acknowledge that if any creditors have been omitted from my list of creditors, I may need to pay additional filing fees and attorney's fees to amend my bankruptcy petition; failure to list a debt can sometimes make me ineligible for discharge of the debt.

***I further acknowledge that my bankruptcy intake meeting with LAW OFFICES OF KAREN WARE PC will need to be continued to a later date if I do not bring a copy of this completed questionnaire to my intake meeting. Additional attorney's fees will apply to continued intake meetings.***

***I understand I will have additional expenses for attorney's fees and court filing fees if I have omitted information from this questionnaire.***

Date\_\_\_\_\_ Signature\_\_\_\_\_

Date\_\_\_\_\_ Signature\_\_\_\_\_



