

**Law Office of  
MELISSA A. RASKEY  
Attorney At Law**

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**QUESTIONNAIRE**

Though it may be difficult to answer the personal questions in this booklet, this office needs your answers to complete the bankruptcy documents and to properly advise you of your rights and responsibilities. As with all communications between you and anyone in our office, the information you supply is CONFIDENTIAL. Never keep information from us because you are afraid or embarrassed; to properly advise you, we must have ALL the facts.

Please complete the following questionnaire using your best efforts. If you are married and living with your spouse please include all information as to your spouse as well, even if you are filing alone. If you believe any question does not apply to you, please mark "N/A"; do not skip it. Please be certain to answer each question completely. If space is inadequate, please attach additional sheets.

If you are uncertain as to the meaning of a question or your answer to it, please so indicate by marking the question or answer with a "?" in the margin next to it.

After you have completed the questionnaire, please sign and date it. Your answers will be used to complete your bankruptcy petition to be filed with the court. Although it is possible to change or amend the petition after it is filed, it is much easier and less expensive to file a complete and accurate petition from the beginning. In order to charge our Clients a reduced fee to file a bankruptcy petition, we ask that you provide COPIES of all the documents listed below so we do not have to charge you a copy charge.

Please print and write clearly!

Documents To Be Provided (new bankruptcy law requirements; provide all that apply):

1. **INCOME & DEDUCTIONS-** All Papers regarding your Income and Deductions for the past **six (6)** months including:
  - a. Paycheck stubs (including commissions and bonuses)
  - b. Any unemployment benefits, child or spousal support, Social Security payments, bank interest income, stock dividend income, pension or retirement income, rental income, or any other income received
  - c. Papers regarding any retirement contributions, insurance deductions, or other paycheck deductions
  
2. **FINANCES-** All papers regarding your expenses and assets including:
  - a. Monthly bank statements for the past six (6) months
  - b. Tax Returns for the past two (2) years. If a Chapter 13, four (4) years tax returns are required. BOTH FEDERAL AND STATE.
  - c. Papers regarding any real property owned in the past ten (10) years
  - d. A recent credit report (Go to [www.annualcreditreport.com](http://www.annualcreditreport.com) for free copy).

- e. Copy of DMV registration or certificates of title for all vehicles and/or any all terrain, recreational vehicles etc.
- f. All of the most recent creditor statements you have in your possession including, but not limited to, mortgage statements and motor vehicle statements.  
**Copy of your certificate of counseling certificate** from [www.abacus.org](http://www.abacus.org), bothcourses.com, [www.a123cc.org](http://www.a123cc.org), www.accesscounseling.inc.
- g. After we file your bankruptcy petition you will need to take a second course titled “**financial management course**”.

**I. PERSONAL INFORMATION**

Full Name: \_\_\_\_\_  
(PLEASE LIST YOUR MIDDLE NAME IF YOU HAVE ONE)

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

Birth date: \_\_\_\_\_ Age \_\_\_\_\_

Spouse’s Full Name: \_\_\_\_\_  
(PLEASE LIST YOUR MIDDLE NAME IF YOU HAVE ONE)

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

Birth date: \_\_\_\_\_ Age \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**List any alternative names (full names) you or your spouse has used in the past 8 years (e.g. maiden name):** \_\_\_\_\_

Marital Status: [ ] Married [ ] Single [ ] Divorced

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone  
Home: \_\_\_\_\_ Work: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Spouse’s Home Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Spouse’s Telephone (if different)  
Home: \_\_\_\_\_ Work: \_\_\_\_\_

Spouse’s Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Where else have you lived in the last Two years (if any):

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Dates of Residency From: \_\_\_\_\_ To: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Dates of Residency From: \_\_\_\_\_ To: \_\_\_\_\_

## II. RELATED CASE INFORMATION

Have you ever filed Bankruptcy before?  yes  no

If yes:

Type of case:  chapter 7  chapter 13  chapter 11

**Date filed:** \_\_\_\_\_ **Case Number** (if you know it): \_\_\_\_\_

**Location:** \_\_\_\_\_

Was a discharge granted:  yes  no

## III. REAL PROPERTY

Have you owned any real property in the last 10 years?  yes  no

Have you ever had your name on title of the home you rent now?  yes  no

Do you own any real property?  yes  no

If yes description or address of property and value:

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

Additional real property:

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

Name of Owners: \_\_\_\_\_

Present fair market value: \$ \_\_\_\_\_

How was value arrived at, i.e., appraisal, realtor, and sales of similar properties?

Mortgage holder: \_\_\_\_\_

Mortgage balance: \$ \_\_\_\_\_  
2ndMortgage holder: \_\_\_\_\_  
2ndMortgage balance: \$ \_\_\_\_\_  
3rd Mortgage holder: \_\_\_\_\_  
3rd Mortgage balance: \$ \_\_\_\_\_

Is the property your residence? [ ] yes [ ] no  
Is it your intension to keep this property? [ ] yes [ ] no

**IV. PERSONAL PROPERTY-** Please list the fair market value of your personal property, not what you paid for it, but the amount it would sell for if you had to sell it today at a garage sale or auction. (Exemption 703.140)

Cash on hand: \$ \_\_\_\_\_

Checking/Savings accounts. List bank name, address, account number, and balance of account:

Account #1: \_\_\_\_\_  
\_\_\_\_\_

Account #2: \_\_\_\_\_  
\_\_\_\_\_

Account #3: \_\_\_\_\_  
\_\_\_\_\_

Security Deposits (including residential lease deposit) and Name of Person or company holding deposit:  
\$ \_\_\_\_\_ / Name: \_\_\_\_\_

List all household goods and furnishings including audio, video and computer equipment with corresponding values for each item (attach extra pages if necessary) i.e. **Dining room set, Living room set, Hutch, Three bedroom sets, dishware, 2 televisions, 2 DVD players, gardening tools, carpentry tools, tool chest, WII game system console, China set, pool table, etc :**

**Description of Property:**

**Value** (fair market value today, as if sold at auction or garage sale):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Value of all clothing (fair market value): \$ \_\_\_\_\_

Value of any Jewelry: \$ \_\_\_\_\_ Describe: \_\_\_\_\_

Cash value of any insurance policies: \$ \_\_\_\_\_

If so, Name and address of policyholder: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Annuities: \_\_\_\_\_

List any interest in IRA, Pension, 401(k), Keogh or other pension or profit sharing plan:

Current value: \$ \_\_\_\_\_

List any stocks, bonds, interests in corporations or unincorporated businesses:

**Automobiles/Trucks/Motorcycles:**

List year, make, model and value of each vehicle (e.g.: 1999 Ford Taurus \$7,000). Please use **NADA guide online or Kelley Blue Book online** to get the estimated value of the vehicle. Print the Value you find and return it to our office with this questionnaire:

:

Auto #1: \_\_\_\_\_ mileage \_\_\_\_\_

Auto #2: \_\_\_\_\_ mileage \_\_\_\_\_

Auto #3: \_\_\_\_\_ mileage \_\_\_\_\_

List name of lender and amount owed for each vehicle:

Auto #1:

Name of Lender: \_\_\_\_\_

Amount owed: \_\_\_\_\_ Are you current? [ ] yes [ ] no

Auto #2:

Name of Lender: \_\_\_\_\_

Amount owed: \_\_\_\_\_ Are you current? [ ] yes [ ] no

Auto #3:

Name of Lender: \_\_\_\_\_

Amount owed: \_\_\_\_\_ Are you current? [ ] yes [ ] no

List any other valuable collectibles over \$400 in value:

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

List any other valuable personal property not mentioned above, including boats, airplanes, firearms, sporting/hobby equipment, photographic equipment, trailers, vehicle accessories, and the like including value of each:

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

Do you own any:

Value

Explain:

Interests in partnerships: \$ \_\_\_\_\_

Accounts Receivable: \$ \_\_\_\_\_

Alimony, Support or Related \_\_\_\_\_

Settlements: \$ \_\_\_\_\_

Potential Tax Refund: \$ \_\_\_\_\_

Potential Law Suit Award: \$ \_\_\_\_\_

Potential Estate or Probate

Settlements:	\$ _____	_____
Office Equipment, Furnishings and Supplies:	\$ _____	_____
Business Machinery, Equipment and Tools:	\$ _____	_____
Business Inventory:	\$ _____	_____
Farm Equipment, Supplies and Implements:	\$ _____	_____
Crops in process or harvested:	\$ _____	_____
Patents, Copyrights or Franchises:	\$ _____	_____
Other Assets:	\$ _____	_____

**INSTRUCTIONS FOR COMPLETING LIST OF CREDITORS**

**WE WILL RUN YOUR CREDIT REPORT SO YOU CAN LEAVE THIS SECTION BLANK OR ONLY WRITE IN THE CREDITORS YOU KNOW DO NOT SHOW UP ON YOUR CREDIT REPORT. ONCE WE SEND YOUR PETITION TO YOU FOR YOUR REVIEW IT WILL BE YOUR RESPONSIBILITY TO CONFIRM THAT ALL OF YOUR CREDITORS ARE LISTED.**

When you list your creditors, list ALL of them, even those you intend to pay. Failure to do so can be very dangerous.

List their names and addresses (including zip codes) in full. Even if you dispute a debt or a part of the debt, list the total amount that you owe or list the approximate amount if you are unsure, BUT DO NOT ESTIMATE TOO LOW. Be sure to show the date each debt was incurred, and the nature or purpose of the debt (e. g. “medical bill”, “washer and dryer”, or purchase of a 1995 Chevrolet”).

If a collection agency or lawyer has been in touch with you about a debt that you originally owed to someone else, list the name of the original creditor, the collection agency, the lawyer, the finance company, or anyone else who has communicated with you about the debt.

An unsecured creditor is one who has no security interest for this loan other than your general assets.

A secured creditor is one who is in a position to take property away from you because you made an agreement permitting them to take this property should you default on the terms of the contract. Examples of secured creditors are the holders of your home mortgage, the company that financed your car, and most purchases made through finance companies.

If you owe more than one debt to the same creditor include information about each individual debt.

Often the right of the original creditors to collect the money or property is transferred by them to another party known as the “assignee” of your creditor. This assignee may be a collection agency, a finance company, bank, or other business. If you are now or ever have been making payments to anyone other than your original creditor, list the creditor and ALL others to whom you have made payments.

Unfortunately, few people realize how many creditors they have. For example, if a debt has been assigned, as explained above, the party to whom the debt was originally owed is a creditor and so is the party who had attempted to collect the debt, e. g., a collection agency, or an attorney. All should be listed.

**TAKE YOUR TIME!!** Any debt that you do not list may not be discharged in bankruptcy. List even debts that you intend to pay, and even debts someone claims you owe that you claim you do not owe. Inaccurate or incomplete answers may result in complete loss of your right to discharge in bankruptcy. List addresses accurately, along with zip codes. A creditor, who is not notified of the bankruptcy, is not bound by it and therefore will may ignore your bankruptcy. **Our office cannot be held responsible for ANY CREDITORS you did not list on this QUESTIONNAIRE.**

Creditor's Name and Address		Collection Agency, if any
Name: Address: City, State, Zip:		Name: Address: City, State, Zip:
Last 4 digits of Acct No.:	Amount Owed:	What is debt for? <input type="checkbox"/> Credit Card <input type="checkbox"/> Personal Loan <input type="checkbox"/> Other_____
Date(s) debt incurred:	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	Secured Options: <input type="checkbox"/> Reaffirm <input type="checkbox"/> Surrender Property
Has creditor taken any action? <input type="checkbox"/> Collection Agency <input type="checkbox"/> Foreclosed <input type="checkbox"/> Brought Lawsuit <input type="checkbox"/> Repossession Details/date:_____		<input type="checkbox"/> Co-Debtor [name and address]
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Has creditor taken any action? <input type="checkbox"/> Collection Agency <input type="checkbox"/> Foreclosed <input type="checkbox"/> Brought Lawsuit <input type="checkbox"/> Repossession Details/date:_____		<input type="checkbox"/> Co-Debtor [name and address]

**V. INCOME and EXPENSES**

**PLEASE LIST NAMES AND AGES OF DEPENDENTS CLAIMED:**

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
RELATIONSHIP: \_\_\_\_\_

List the Name and Address of your employer:

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

Job Title or Occupation: \_\_\_\_\_  
Years on the job: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Current Age: \_\_\_\_\_

List the Name and Address of your Spouse's employer:

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

Job Title or Occupation: \_\_\_\_\_  
Years on the job: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Current Age: \_\_\_\_\_

PLEASE LIST YOUR CURRENT INCOME AND DEDUCTIONS

	Debtor (1)	Debtor (2)
MONTHLY INCOME:	\$ _____	\$ _____
ESTIMATED OVERTIME	\$ _____	\$ _____
DEDUCTIONS FROM CHECK:		
ALL TAXES/SS	\$ _____	\$ _____
INSURANCE	\$ _____	\$ _____
UNION DUES	\$ _____	\$ _____
401k	\$ _____	\$ _____
OTHER: _____	\$ _____	\$ _____
INCOME FROM REAL PROPERTY	\$ _____	\$ _____
INTEREST & DIVIDENDS	\$ _____	\$ _____
CHILD SUPPORT/ALIMONY	\$ _____	\$ _____

RECEIVED FOR Debtor (1) dependent:

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

RECEIVED FOR Debtor (2) dependent:

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_  
NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

SOCIAL SECURITY & GOV'T ASSISTANCE	\$ _____	\$ _____
PENSION & RETIREMENT	\$ _____	\$ _____
OTHER INCOME RECEIVED:	\$ _____	\$ _____

PLEASE EXPLAIN:

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Will there be any changes in your income in the within the next year please explain:

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**LIST ALL YOUR MONTHLY EXPENSES**

RENT\MORTGAGE PAYMENT(s): \$ \_\_\_\_\_  
PROPERTY TAXES: \* \$ \_\_\_\_\_  
PROPERTY INSURANCE: \* \$ \_\_\_\_\_

\*If not included in mortgage payment

UTILITIES:

ELECTRICITY\NATURAL GAS: \$ \_\_\_\_\_  
WATER\SEWER\GARBAGE: \$ \_\_\_\_\_  
TELEPHONE: \$ \_\_\_\_\_  
CELL PHONE \$ \_\_\_\_\_  
PROPANE: \$ \_\_\_\_\_  
SECURITY: \$ \_\_\_\_\_  
CABLE, SATELLITE: \$ \_\_\_\_\_  
INTERNET: \$ \_\_\_\_\_

HOME MAINTENANCE: \$ \_\_\_\_\_

FOOD: \$ \_\_\_\_\_

CLOTHING: \$ \_\_\_\_\_

LAUNDRY\DRY CLEANING: \$ \_\_\_\_\_

MEDICAL & DRUG: \$ \_\_\_\_\_

AUTO (gas & repairs): \$ \_\_\_\_\_

RECREATION\NEWSPAPER: \$ \_\_\_\_\_

CONTRIBUTIONS (Church, etc.): \$ \_\_\_\_\_

INSURANCE:

RENTERS: \$ \_\_\_\_\_

LIFE: \$ \_\_\_\_\_

HEALTH:\*\* \$ \_\_\_\_\_

VEHICLE: \$ \_\_\_\_\_

OTHER: \$ \_\_\_\_\_

\*\*If not deducted from wages

VEHICLE PAYMENT: \$ \_\_\_\_\_

VEHICLE REGISTRATION: \*\*\* \$ \_\_\_\_\_

\*\*\*Divide yearly registration by twelve

CHILD\SPOUSAL SUPPORT \$ \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_

DAY CARE\ BABYSITTING: \$ \_\_\_\_\_

CONTINUING EDUCATION: \$ \_\_\_\_\_

PARKING: \$ \_\_\_\_\_

**AVERAGE MONTHLY BUSINESS INCOME AND EXPENSE STATEMENT**

**PLEASE NOTE: TO BE FILLED OUT ONLY IF YOU ARE SELF-EMPLOYED-You must also provide a 6 month profit and loss statement!**

Debtor Name: \_\_\_\_\_

DBA (if applicable): \_\_\_\_\_

**RECEIPTS**

Gross Sales/Gross Fees:	\$ _____
Collection on Account Receivable:	\$ _____
Rents:	\$ _____
Other:	\$ _____
<b>TOTAL INCOME:</b>	<b>\$ _____</b>

**COST OF SALES**

Materials and Supplies:	\$ _____
<b>TOTAL COST OF GOODS SOLD</b>	<b>\$ _____</b>

**GROSS PROFIT:** \$ \_\_\_\_\_

**OPERATING EXPENSES**

Net Wages:	\$ _____
Payroll Taxes:	\$ _____
Estimated Tax Payments:	\$ _____
Rent/Mortgage/Lease:	\$ _____
Business Taxes/Licenses/Permits:	\$ _____
Repairs/Maintenance:	\$ _____
Fuel/Transportation Costs:	\$ _____
Equipment & Tools (Purchase/Lease):	\$ _____
Dues/Subscriptions:	\$ _____
Insurance:	\$ _____
Office Supplies/Postage:	\$ _____
Advertising:	\$ _____
Utilities:	\$ _____
Telephone:	\$ _____
Outside Services (Bookkeeping/Legal/Janitorial/Cleaning):	\$ _____
Other (Attach breakdown):	\$ _____
<b>TOTAL OPERATING EXPENSES:</b>	<b>\$ _____</b>

**NET PROFIT/LOSS:** \$ \_\_\_\_\_

**VI. FINANCIAL AFFAIRS**

1. List **gross income** (before taxes) from work for the following years:  
2023 Year to date: \_\_\_\_\_  
2022 Last year: \_\_\_\_\_  
2021 Year before last: \_\_\_\_\_

List Spouse's gross income (before taxes) from work for the following years:  
2023 Year to date: \_\_\_\_\_  
2022 Last year: \_\_\_\_\_  
2021 Year before last: \_\_\_\_\_

2. List income you may have received from other sources including disability, alimony, unemployment etc. for the following years and specify source:  
2023 Year to date: \_\_\_\_\_  
2022 Last year: \_\_\_\_\_ Source: \_\_\_\_\_  
2021 Year before last: \_\_\_\_\_  
Your Spouse:  
List income may have received from other sources including disability, alimony, unemployment etc. for the following years and specify source:  
2023 Year to date: \_\_\_\_\_  
2022 Last year: \_\_\_\_\_ Source: \_\_\_\_\_  
2021 Year before last: \_\_\_\_\_

- 3a. Have you paid any creditor more than \$600 in the past 90 days: [ ] yes [ ] no  
If yes, please list the creditor, dates payment made and how much you still owe to creditor:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 3b. Have you made payments to creditors for a business in the last 90 days? [ ] yes [ ] no  
If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

- 3c. Have you repaid any family member inside creditor for any amount in the past year? [ ] yes [ ] no  
If yes, please list the name and address of the creditor and relationship, date of payment, amount paid, and amount still owing:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 4a. Are you being sued or are you suing anyone? [ ] yes [ ] no  
If yes, please attach copies of all court documents you've received and answer or filed:  
By whom: \_\_\_\_\_  
Case Number: \_\_\_\_\_  
Court Location: \_\_\_\_\_  
Status of the case: \_\_\_\_\_  
Please explain nature of the case: \_\_\_\_\_

- 4b. Have you had any property attached, garnished or seized in the last year? [ ] yes [ ] no

If yes please list: the name and address of person for whose benefit property was seized, date of seizure, description and value of property. :

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5. Have you had any Repossessions or Voluntary Returns in the last year? [ ] yes [ ] no

If yes list:

Name of Creditor: \_\_\_\_\_

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

Date of Repossession: \_\_\_\_\_

Value of Item: \$ \_\_\_\_\_

Describe the Repossessed property (i.e., 1995 Chevy, 1997 Jet Ski, etc.):

---

Name of Creditor: \_\_\_\_\_

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

Date of Repossession: \_\_\_\_\_

Value of Item: \$ \_\_\_\_\_

Describe the Repossessed property (i.e., 1995 Chevy Tahoe, 1997 Yamaha Jet Ski, etc.):

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- 6a. Describe any assignment of property for the benefit of creditors made within the last 120 days:

Name and address of assignee: \_\_\_\_\_

Date of Assignment: \_\_\_\_\_

Terms of assignment or settlement: \_\_\_\_\_

- 6b. List all property which has been in the hands of a custodian or receiver within the last year:

Name and address of Custodian: \_\_\_\_\_

Name and address of court, caste title and number: \_\_\_\_\_

Date of order, description and value of property: \_\_\_\_\_

7. Have you given a gift or charitable contribution in the last year? [ ] yes [ ] no

If yes, please list the name and address of person or organization: \_\_\_\_\_

Relationship to debtor: \_\_\_\_\_

Date of gift, description and value of property: \_\_\_\_\_

8. Have you suffered any losses from Fire, Theft, Gambling, etc. in the past year: [ ] yes [ ] no

If yes, please list the description and value of property: \_\_\_\_\_

Date of loss \_\_\_\_\_

Description of circumstances and if loss was covered in whole or in part by insurance, give particulars:

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9. List the Payments you made related to Debt Counseling or Bankruptcy:

Paid Attorney \$\_\_\_\_\_ List the name of credit counseling agency and amount paid:

\_\_\_\_\_

10a. Have you transferred any property to any other person in the last 2 years: [ ] yes [ ] no  
If yes, please list name and address of transferee, relationship to debtor: \_\_\_\_\_

Date \_\_\_\_\_

Describe property transferred and value received: \_\_\_\_\_

\_\_\_\_\_

11. List all Financial Accounts that you have closed in the past year (if any):  
Institution Name and Location: \_\_\_\_\_

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

Balance at time: \$\_\_\_\_\_

Institution Name and Location: \_\_\_\_\_

\_\_\_\_\_

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

Balance at time: \$\_\_\_\_\_

12. Do you have any Safe Deposit Box? [ ] yes [ ] no  
If yes, Location: \_\_\_\_\_

Description of contents: \_\_\_\_\_

13. List all Setoffs made by any creditor, including a bank against you within the last 90 days:

\_\_\_\_\_

14. Are you holding any property for anyone else? [ ] yes [ ] no  
If yes, Explain: \_\_\_\_\_

15. List your prior addresses for the last 3 years if it is different from your current address and the dates you lived at each address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

16. List your spouses and former spouses: \_\_\_\_\_

\_\_\_\_\_

17. Have you been subject to violation of any environmental laws, (contamination, pollution, release of hazardous materials): [ ] yes [ ] no

If yes, Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

18. Have you been in business for yourself in the past 2 years: [ ] yes [ ] no  
If yes, Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you been in business or a partnership with someone else in the past 6 years: [ ] yes [ ] no

If yes, please explain:

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Have you co-signed for any property that is not yet paid off? [ ] yes [ ] no

If yes, please provide name and address of the person you co -signed for:

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

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

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

Note: Don't forget to add this creditor to your "List of Creditors"

Please sign to acknowledge:

I/We have reviewed the foregoing information, and to the best of my/our knowledge, it is complete and correct.

Dated: \_\_\_\_\_ SIGNED: \_\_\_\_\_  
DEBTOR

Dated: \_\_\_\_\_ SIGNED: \_\_\_\_\_  
DEBTOR SPOUSE