Client Questionnaire For Non-Business Debtor Section 1 № Basic Information

Part A. Name and Address

Name: Last	First	Middle
Telephone Number Home:	Wor	k:
Have you used any other name	s in the past eight years? No	☐ Yes If yes, list other names
Social Security Number:	-	
Address:		
City:	State: Zip:	
County:		
Have you lived at this address f	or at least 180 days? ☐ No ☐ Y	'es
Have you lived at this address f	or at least 730 days (2 years)?	No ☐ Yes
If you answered no to either of t	he questions above, please list you	ur previous address:
Address:		
		Zip:
County:		
If you have a different mailing a	ddress nlease list:	
•	udress, piedse list.	
Oity.	State 21p.	
rt B. Name and Addr	ess of Spouse	
	spouse, fill in the following informa	tion about your spouse:
		, .
Last	First	Middle
Has your spouse used any othe <i>names:</i>	r names in the past eight years?	☐ No ☐ Yes <i>If yes, list other</i>
Social Security Number:	⁻	
Address: (if different from y	our address):	
City:	State: Zip:	County:
If your spouse has a different m		
Mailing Address:		

Part C. Prior/Pending Bankruptcy Cases Has a bankruptcy case been filed by you or against you in the last 8 years? ☐ No ☐ Yes If yes, in which district of which 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? ☐ No ☐ Yes If yes, name of debtor: _____ Relationship to you: _____ Case Number: ______ Date filed: ______ Judge: ______ In which district of which state was the case filed? **Exhibit "C" to the Voluntary Petition** Do you own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? \square No \square Yes (If yes, please attach a list and description of the property.) **Debtors Who Reside as Tenants of Residential Property** If you rent your home, does a landlord hold a judgment against you? ☐ No ☐ Yes If yes, please provide the name and address of the landlord: Name: _____ Address:

City: _____ Zip: _____

Section 2 **№** Property

Part A. Real Estate (Schedule A)

List all real estate which you own or are a joint owner of, even if you still owe money on the property.

Address and description of property	Owned by Husband, Wife, Joint or Community	Value	Your % ownership, or \$ amount, if you and spouse are not sole owners	List all mortgages, home equity loans, and liens: What is the \$ value of the loan, lien or mortgage? What is your monthly payment? How many payments are left?	Who issued the lien, loan or mortgage? (Name, Address of Institution)	Office Use Only Exemptions?

Part B. Personal Property (Schedule B)

For each type of property listed below, indicate whether you own any property of that category, and, if you do, fill in the remaining information. You can think of the value as the replacement value. For property acquired for personal or family use, replacement value is the price a retail merchant would charge for a property of that kind, considering the age and condition of that property.

	Yes/		Husband, Wife, Joint,		Office Use Only
Type of Property	No	Description & Location	Community	Value	Exemptions?
Cash on hand					
2. Checking/Savings Account, Certificates of deposit, other bank accounts					
3. Security deposits held by utility companies, landlord					
4. Household goods, furniture, including audio, video, and computer equipment					

	Yes/		Husband, Wife, Joint,		Office Use Only
Type of Property	No	Description & Location	Community	Value	Exemptions?
Books, pictures, art objects, records, compact discs, collectibles	110	Dodonphor a Location		Value	Exemptions.
6. Clothing					
7. Furs and jewelry					
8. Sports, photographic, hobby equipment, firearms					
Interest in insurance policies-specify refund or cancellation value					
10. Annuities					
11. Interests in an education IRA, as defined in 26 USC § 530(b)(1)					
12. Interests in pension or profit sharing plans					

	No d		Husband, Wife, Joint,		Office Use Only
Type of Property	Yes/ No	Description & Location	Community	Value	Exemptions?
13. Stock and interests in incorporated/ unincorporated business					
14. Interests in partnerships/joint ventures					
15. Bonds					
16. Accounts receivable					
17. Alimony/family support to which you are entitled					
18. Other liquidated debts owed to you, including tax refunds					
19. Equitable or future interests or life estates					
20. Interests in estate of decedent or life insurance plan or trust					
21. Other contigent/ unliquidated claims, including tax refunds, counterclaims					
22. Patents, copyrights, other intellectual property					
23. Licenses, franchises					

	Yes/		Husband, Wife, Joint,		Office Use Only
Type of Property	No	Description & Location	Community	Value	Exemptions?
24. Customer List or				1 3.70.0	
other compilation					
25. Automobiles, trucks,					
trailers, and accessories.					
26. Boats, motors, and					
accessories					
27. Aircraft and					
accessories					
28. Office equipment,					
supplies					
29. Machinery, fixtures					
etc. for business					
30. Inventory					
31. Animals					
32. Crops-growing or harvested					
33. Farming equipment and implements					
and implements					
34. Farm supplies,					
chemicals, feed					
1		1	1	l	

Type of Property	Yes/	Description & Location	Husband, Wife, Joint, Community	Value	Office Use Only
Type of Property 35. Other personal property of any kind not listed.	No	Description & Location	Community	Value	Exemptions?

Section 3 & Debts

List below all debts that you owe, or that creditors claim that you owe.

	Creditor Name and Address				Office Use Only		
Type of Debt	Account Number, if any Date/range of dates when debt was incurred Contact person's name and address, if different	Amount owed	Name and address of codebtor, if any What is debt for? Is debt secured by any property? (If so, please list monthly payment and number of months left.)	Do you dispute the debt?	Sched D, E or F?	Lawsuit pending? Collection agency assigned? Counsel for creditor?	
Home loans/ mortgages							
Car loans							
Other bank loans							
Personal loans							
Student loans							
Major credit card debts (Visa, Am Ex, Mastercard, Discover) - continue on next							

				· i		
					Offi	ce Use Only
page, if necessary						
	Creditor Name and Address				Offi	ce Use Only
Type of Debt	Account Number, if any Date/range of dates when debt was incurred Contact person's name and address, if different	Amount owed	Name and address of codebtor, if any What is debt for? Is debt secured by any property? (If so, please list monthly payment and number of months left.)	Do you dispute the debt?	Sched D, E or F?	Lawsuit pending? Collection agency assigned? Counsel for creditor?
Unpaid credit cards, (Visa, Am Ex, Mastercard, Discover) continued						
Department store credit card debts						
Other credit card debts (Gas cards, phone cards, etc.)						
Unpaid medical bills						

			Offic	ce Use Only
Unpaid utility bills				

	Creditor Name and Address				Office Use Only		
Type of Debt	Account Number, if any Date/range of dates when debt was incurred Contact person's name and address, if different	Amount owed	Name and address of codebtor, if any What is debt for? Is debt secured by any property? (If so, please list monthly payment and number of months left.)	Do you dispute the debt?	Sched D, E or F?	Lawsuit pending? Collection agency assigned? Counsel for creditor?	
Unpaid rent							
Unpaid taxes							
Unpaid alimony or child support							
Unpaid service fees							
All other unpaid debts/bills							

Section 4 **№** Unexpired Leases and Contracts (Schedule G)

List below any leases or contracts that are still current that you are a party to. Include residential, car and business leases, and service or business contracts.

Nature and Description of Contract	Name and Address of Other Party or Parties	Date that Contract Expires

Section 5 & Current Income

Marital Status:	List all dependents of you and your spouse, their ages, and their relationship to you:				
□ Married□ Single□ Divorced□ Separated□ Widowed	Name		Age	Relationship	
Part A. Debtor's	Income	Part B. Joint Debto	or's Income	,	
1. What is your occu	upation?	1. What is your spous	se's occupatio	on?	
Name and address of your employer:		Name and address	s of your spou	se's employer:	
3. How long have ye	ou been employed there?	3. How long employe	ad there?		
4. What is the gross	amount of your paycheck, before are taken out? \$	What is the gross a before taxes/other dedu	amount of you	ır spouse's paycheck,	
5. How often do you get paid? ☐ once a week ☐ twice a month ☐ once a month ☐		5. How often does your spouse get paid? □ once a week □ every two weeks □ twice a month □ once a month □ other			
other	<u></u>	Complete the below questions with your estimate of			
Complete the below questions with your estimate of monthly averages. 6. Do you receive overtime pay outside of your salary? If so, how much per month? \$		monthly averages.			
		6. Does your spouse receive overtime pay outside of your salary? How much per month? \$			
	en out of each paycheck for taxes	7. How much is taken out of each paycheck for taxes and social security? \$			
•	en out for insurance? \$	8. How much is taken out for insurance? \$9. How much for union dues? \$10. Are there other deductions? If so, what are they and how much?			
	on dues? \$				
10. Are there other de	eductions? If so, what are they and				
Do you receive a) income from business operations outside of your regular paycheck listed above? If so, what is the		Does your spouse rece a) income from busine paycheck listed above? how much does your sp	ess operations ? If so, what i	s the business and	
b) income from real	uch do you receive per month? estate property? If so, how much	b) income from real es month? □No □Yes			
-	ds? If so, how much per month?	c) interest or dividends □No □Yes \$		•	
	support payments for your use or for endents? If so, how much per	d) alimony or family su for care of dependents' □Yes \$? If so, how r	nuch per month? □No	
	other forms of monetary government	e) social security or otl assistance? □No □Ye	es \$		
		f) retirement or pension money? □No □Yes\$			
f) retirement or pension money? □No □Yes\$Do you have any other sources of income not listed?		Does your spouse have	e any other in	come not listed?	

Are you or your spouse expecting any increase or decrease in salary next year? If so, explain.

Section 5A & Current Monthly Income

Fill in your monthly income for the categories below in the column labeled "Month 1." If your income for one of the below categories varies from month to month, complete the below chart by entering in your income for all six months.

Thomas, complete the below chart by	Month 1 (last month)	Month 2 (2 months ago)	Month 3 /	Month 4 /	Month 5/_	Month 6 /	Office Use Only
Gross wages, salary, tips, bonuses, overtime, commissions.							
Income from operation of business: a. Gross Income - b. Expenses = c. Net Income.							
Rent and other real property income: a. Gross Income - b. Expenses = c. Net Income.							
Interest, dividends, and royalties.							
Pension and retirement income (NOT Social Security).							
Regular contributions from others to the household expenses, including child support.							
Unemployment Compensation.							
Social Security income.							

Other sources not already				
mentioned. Specify:				

Section 6 & Current Expenses

Do you and your spouse maintain separate households? \square No \square Yes. If so, fill one page out for your household and another for your spouse's.

The following questions ask for your expenses each month. If you are unsure of the amount you pay each month, but know the amount for a different period (per week, per day, every 2 months, etc.,), write in the amount and the frequency that you pay the amount.

Indicate how much you pay for each item each month... 1. your rent or your home mortgage Does that amount include real estate taxes? ☐ No ☐ Yes Does it include property insurance? ☐ No ☐ Yes 2. electricity and heating 3. water and sewage 4. telephone service/long distance 5. Do you have any other utility bills? If so, what, and how much per month? 6. home maintenance, including repairs and general upkeep 7. food 8. clothing 9. laundry and dry cleaning 10. medical and dental expenses 11. transportation (not including car payments) 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) 17. alimony, maintenance, support paid to others 18. payments for support of dependents not living at home 19. expenses from operation of business Additional Expenses (707(b) Expenses) 20. mandatory payroll deductions not already listed _____

court ordered payments not already listed	\$
	\$
	\$
education necessary to maintain employment	\$
education for a physically or mentally challenged child	\$
childcare	\$
disability insurance (if not listed on line 14)	\$
health savings accounts	\$
care for elderly, chronically ill, or disabled family members	\$
protection from family violence	\$
education expense for your children under 18	\$
non-mandatory contributions to retirement accounts (including loan	repayment)
	\$
	\$
other expenses not listed above	\$
	\$
	\$
	\$
	education necessary to maintain employment education for a physically or mentally challenged child childcare disability insurance (if not listed on line 14) health savings accounts care for elderly, chronically ill, or disabled family members protection from family violence education expense for your children under 18 non-mandatory contributions to retirement accounts (including loan other expenses not listed above

Section 7 & Statement of Financial Affairs

If you are filing jointly with your spouse, include information about both you and your spouse. If you are filing under chapter 12 or 13, and you are married and not separated, you must provide information about your spouse even if you are not filing jointly.

If you have no information to report for a question, check the "NONE" box.

1. Income from employme	nt or operation of business		
	from employment or operation the two years immediately p		
□ NONE			
Period	\$ Amount	Source	Husband/Wife
January 1 of this year throug date of commencement of ca			
Last year, (January 1 - Dece	mber 31)		
The year before last, (January 1 - December 31)			
2. Income other than from	employment or operation of l	ousiness	
	me received other than from ding the commencement of t		of business during the two
□ NONE			
Period	\$ Amount	Source	Husband/Wife
During the last year			
Year before last			
 Payments to creditors 			
or services, and othe immediately precedir	narily consumer debts, list all r debts, aggregating more thing the commencement of this count of a domestic support t plan.	an \$600 to any creditor m case. Indicate with an as	nade within 90 days sterisk (*) any payments
□ NONE			
Name and Address of	Creditor Dates of Paym	ents Amount paid	Amount still owed

b.	If your debts are not primarily conthan \$5,000 to any creditor made case.			
	NONE			
	Name and Address of Creditor	Dates of Payments	Amount paid	Amount still owed[
C.	All debtors. List all payments made case to or for the benefit of creditor business partners and their relative	rs who are or were "ins	siders". ("Insiders"	
	NONE			
	Name and Address of Creditor and Relationship to You	Dates of Payments	Amount Paid	Amount Still Owed
	Suits, executions, garnishments at List all suits and administrative pro the filing of this case.		are or were a part	y within one year preceding
	NONE Caption of Suit and Case Number Nature of F		Court or Agency and Location	Status or Disposition
	Describe all property that has been within one year immediately preceded NONE Name and Address of Person/Confor Whom the Property Was Seize	eding the commencement		y legal or equitable process Description and Value of Property

5. Repossessions, fore	5. Repossessions, foreclosures, and returns				
	e, or returned	ssed by a creditor, sold at to the seller, within one y		ale, transferred through a preceding the	
□ NONE					
Name and Address	of Creditor	Date of Repossession, Foreclosure, Transfer of	or Return	Description and Value of Property	
6. Assignments and re	·				
preceding the comm		ty for the benefit of credit his case.	ors made within	120 days immediately	
□ NONE					
Name and Address	of Assignee	Date of Assignment	Terms of A	Assignment/Settlement	
		the hands of a custodian, e commencement of this		urt-appointed official within	
Name and Address of Custodian		e and location of Court, Title and Number	Date of Order	Description and Value of Property	
7. Gifts					
this case except ordinary	y and usual gift	made within one year imr s to family members agg e contributions aggregatir	regating less tha		
□ NONE					
Name and Address of Recipient	Rela	tionship to You, if Any	Date of Gift	Description and Value of Gift	

8. LOSSES			
List all losses from fire, theft, of commencement of this case of			
□ NONE			
Description and Value of Property		ion of Circumstances and mount Covered by Insuranc	e, if Any Date of Loss
9. Payments related to debt	counseling o	r bankruptcy	
	cerning debt	consultation, relief under th	ebtor to any persons, including ne bankruptcy law or preparation of commencement of the case.
□ NONE			
Name and Address of Payee	Date of Payment	Name of Person Who Paid, if Not You	Amount of Money/ Description and Value of Property
 10. Other transfers (including a. List all other property, other affairs, transferred either absordancement of this case. NONE 	than propert	y transferred in your ordina	ry course of business or financial mmediately preceding the
Name and Address of Tra and Relationship to you	nsferee	Date of Transfer	Description of Property Transferred and Value Received
b. List all property you transfe a self-settled trust, or a similar			ing the commencement of this case to
Name of Trust or			Amount of Money or Description
Similar Device		Date of Transfer	and Value of Property or Interest

11. Closed financial accounts	5	
	instruments held in your name or for your pear immediately preceding the cor	
□ NONE	ne year immediately preceding the cor	mineriodinent of this sase.
Name and Address of Institution	Type and Number of Account & Final Balance	Amount and Date of Sale or Closing
		-
12. Safe deposit boxes		
List each safe deposit or othe	r box or depository in which you have on mediately preceding commencement of	
□ NONE		
Name and Address of Bank or Other Depository	Name and Address of Those With Access to Box or Depositor	Description Date of y of Contents Transfer, if Any
13. Setoffs		
List all setoffs made by any cr preceding the commencemen	reditor, including a bank, against a debi	or deposit of yours within 90 days
□ NONE		
Name and Address of Cre	editor Date of Setoff	Amount of Setoff
14. Property held for another	person	
. ,	or control that is owned by another per	son
□ NONE	or control and the control by another per	
Name and Address of Ow	ner Description and Value of Pr	operty Location of Property
15. Prior address of debtor		
		accompanies of this case list all
residences during the last three	three years immediately preceding the ee years, excluding your present addre	
□ NONE	Vous Norse of the Time	Detect of Occurrence
Address	Your Name at the Time	Dates of Occupancy

16. Spouses and Former Spouse	es				
If you reside or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of your spouse and of any former spouse who resides or resided with you in the community property state.					
□ NONE					
Name					
17. Environmental Information.					
For the purpose of this question,	the following definitions apply:				
"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material. "Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites. "Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic					
substance, hazardous material,	pollutant, or contaminant or simi	lar term under an Env	ironmental Law		
a. List the name and address of that it may be liable or potentially governmental unit, the date of the	y liable under or in violation of ar	n Environmental Law.			
□ NONE					
Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law		
b. List the name and address of of Hazardous Material. Indicate notice.					
□ NONE					
Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law		

	which you are or we	ere a party. Ind	licate the name and add	rs, under any Environmental dress of the governmental unit
■ NONE				
Name and Addr Governmental L		Docket N	lumber	Status or Disposition
18 . Nature, location	and name of busin	ess		
businesses, and be partner, or managin professional within t	ginning and ending g executive of a cor he six years immed cent or more of the	dates of all bus poration, partr diately precedi voting or equit	sinesses in which the de ership, sole proprietors	ion numbers, nature of the ebtor was an officer, director, hip, or was a self-employed of this case, or in which the x years immediately
businesses, and be	ginning and ending he voting or equity :	dates of all bus		n numbers, nature of the ebtor was a partner or owned 5 ately preceding the
businesses, and be	ginning and ending he voting or equity	dates of all bus		n numbers, nature of the ebtor was a partner or owned 5 ately preceding the
□ NONE				
Name	Taxpayer I.D. Number(EIN)	Address	Nature of Business	Beginning and End Dates of Operation
b. Identify any busir	ness listed in respon	se to subdivisi	on a., above, that is "sir	ngle asset real estate" as
defined in 11 U.S.C			, .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
□ NONE	A -1-1.	_		
<u>Name</u>	Address	5		

The following questions, #19-25, are only to be answered if you are a corporation or partnership or if you have been, in the six years immediately preceding this case, an officer, director, managing executive, or owner of more than 5% of the voting securities of the corporation; a partner, other than a limited partner, of a partnership; a sole proprietor, or otherwise self-employed.

19. Books, records, and financial	statements
	ountants who, within the two years immediately preceding the filing of this ervised the keeping of books of account and records.
□ NONE	
Name and Address	Dates Services Rendered
	no, within the two years immediately preceding the filing of this bankruptcy of account and records, or prepared a financial statement of the debtor.
□ NONE	
Name Addr	ress Dates Services Rendered
	to, at the time of the commencement of this case, were in possession of cords. If the records are not available, explain.
□ NONE	
Name and Address	Comments
	reditors and other parties, including mercantile and trade agencies, to was issued by the debtor within two years immediately preceding the
□ NONE	
Name and Address	Date Issued

		entories taken of your prope I the dollar amount and bas	erty, the name of the person who supervised is of each inventory.	
■ NONE				
Date of Invento	ory Ir	ventory Supervisor	Dollar Amount of Inventory (specify cost, market, or other basis)	
b. List the name a in a.) above.	and address of the	e person possessing the red	cords of each of the two inventories reported	
■ NONE				
Date of Invento	ory N	ame and Address of Custoo	dian of Inventory Records	
•		ors, and shareholders		
 a. If your business is a partnership, list the nature and percentage of partnership interest of each member of the partnership. 				
■ NONE				
Name and Add	ress	Nature of Inter	est Percentage of Interest	
			s of the corporation, and each stockholder re of the voting securities of the corporation.	
			Nature and Percentage	
Name and Add	<u>ress T</u>	tle	of Stock Ownership	
22				
22. Former partners, officers, directors and shareholders				
		, list each member who witr nencement of this case.	ndrew from the partnership within one year	
□ NONE				
Name and Add	ress		Date of Withdrawal	
 If your business is a corporation, list all officers or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case. 				
■ NONE				
Name and Add	ress T	itle	Date of Termination	

20. Inventories

23. Withdrawals from a partnership or distribu	utions by a corporation				
If your business is a partnership or corporation insider, including compensation in any form, but other perquisite during one year immediately processes.	onuses, loans, stock red	emptions, options exercised and any			
□ NONE					
Name and Address of Recipient, and Relationship to You	Date and Purpose of Withdrawal	Amount of Money or Description and Value of Property			
24. Tax Consolidation Group.					
If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of the case.					
□ NONE					
Name of Parent Corporation	Taxpayer Identification	Number			
25. Pension Funds.					
If the debtor is not an individual, list the name fund to which the debtor, as an employer, has year period immediately preceding the comm	been responsible for cor				
□ NONE					
Name of Pension Fund	Taxpayer Identification	Number			