

Please Read Immediately!

- Make an appointment as soon as you receive these papers. If you are going to be late, please call so we can adjust your appointment.
- Fill out all the worksheets and compile all of the requested information. Bring in the filing fee to retain us (\$313 for Chapter 13, \$338 Chapter 7) and the up front attorney fee if you are ready to file. (Payment of the filing fee only will retain our firm and obtain limited relief from most pressing collection activity while you pay the attorney fee.) Payment <u>MUST</u> be in cash or money order. Most of the attorney fee for Chapter 13 cases is included in the monthly payment you pay to the Chapter 13 Trustee. Chapter 7 attorney fees must be paid prior to filing.

DOCUMENTS REQUIRED TO FILE BANKRUPTCY

PROOF OF IDENTITY

Photo Identification (Driver's License) and Social Security Card (W-2 or another official government document may replace s.s. card if the full s.s. number is on the document)

PROOF OF INCOME

All pay check stubs, checks and/or other documentation for every time income was received during the 7 months prior to filing bankruptcy.

- If you are missing pay-stubs from any pay period during the last 7 months please obtain a duplicate from your employer or a statement summarizing wages received from your employer for the last 7 calendar months. (Statement must itemize by pay period and show all withholding information)
- You must bring records verifying receipt of child support, alimony, Social Security, disability, retirement, pension, investment, dividend, interest or other income received during the last 7 months.
- If someone is assisting you with living expenses (such as family, friends, roommates or churches) you must bring information verifying how much they have contributed over the last 7 months, broken down by the month.
- Also include records of any bonuses, commissions or expense reimbursement received the last 7 months.
- If you are self-employed you must bring profit and loss statements for the last 7 months and copies of business bank statements.

INCOME TAX RETURNS

Income tax returns (including w-2s, 1099s, etc) for the last 4 years. We must receive actual copies of the most recent year and verification that the prior three years have been filed. If you are self-employed or own a business, we must have copies of the last 2 years of business returns also.

REAL ESTATE DOCUMENTS

Bring your property tax statement for any real estate you have any ownership interest in or that is in your name for any reason.

Bring an appraisal if you have had one recently.

Bring the Deed to the property (or Title of a mobile home).

Bring all mortgage documents or purchase contracts

IF YOU RENT

Bring your lease.

VEHICLES OWNED, LEASED OR IN YOUR POSSESSION

Bring a copy of the title. (To verify proper lien recorded)
Bring your vehicle purchase agreement or vehicle lease if you still owe money.
Bring proof of insurance for your vehicle.

ACCOUNT STATEMENTS

Bring your past 3 months bank statements for **all** checking and savings accounts, prepaid cards, or any online accounts such as Venmo, Paypal, Cashapp, etc.

Bring your most recent retirement account and investment account statements.

If you receive your check on a debit card, please printout the account balance and bring it.

MISCELLANEOUS DOCUMENTS

If Divorced Bring copy of Divorce Decree. If you owe child support (whether you are current or not) bring a copy of the court order showing how much your obligation is.

If you have made any charitable contributions within the last 60 days please bring proof.

If all of the required information is not in our file, we are prohibited from filing your case and your relief will be delayed. However, once you have found all you can, set the appointment to meet with us and we can help you with alternate ways of finding the missing information

IMPORTANT INSTRUCTIONS FOR FILLING OUT THE FORMS IN THIS PACKET

If you have a paper copy of your bills, bring them and there is no need to write them on our worksheets. If you do not have the paper bill then write the bill information down on our worksheets. When filling out the creditor worksheets please use the correspondence address used by the creditor on any bill received within the last 90 days. (This is not where you send the payment, but rather the address they mailed it from or the address they indicate on the bill for you to send correspondence.) If you still have these bills please bring them so we can verify you used the proper address.

CREDIT REPORTS

We obtain your credit report for you once you have paid us in full to file your case.

CREDIT COUNSELING INFORMATION

Participating in one credit counseling session (about one hour) is required to file bankruptcy. You are not required to participate in a repayment program, you are just required to complete the session and obtain a certificate for each person who is filing the bankruptcy. There are several providers that are approved by the U.S. Trustee to provide counseling. We currently recommend Allen Credit & Debt Counseling Agency. You can take the course online at www.allencredit.com. If you do not have access to a computer/smartphone then you can call 1-888-415-8173 and take the course over the phone. The cost is currently \$20 for couples or individuals if taken online, or \$25 if taken by phone. At the conclusion of the course there is a short chat that *must* be completed to receive your certificate. This process must be complete in order to file your case. Please provide them with the **Attorney Code 1a964** and they will email your certificate to us once the course is complete. If it is not complete the day you meet with us, we will prepare your case for filing and wait for the course to be completed. Make sure you complete the creditor worksheets and budget in our packet before contacting them as you will need to provide them this identical information.

Don't hesitate to set your filing appointment with us prior to completing the credit counseling. Once you have met with our office, paid your fees and we have received your credit counseling certificate, we will be ready to file your case.

Rulon T. Burton & Associates 448 East Winchester St., Ste 175, Murray UT 84107

will claim you owe them money. (Take any utilities in these

☐ Are you married and not filing together? List all joint

old places out of your name).

CREDITOR INFORMATION

Bankruptcy law requires that all creditors must be listed. If any creditor is not listed, they may not be discharged and your case may be dismissed. Each creditor listed must include the correspondence address (not the address where you send the payment) including the zip code, the amount owed, the date incurred and the account number. Some creditors, particularly medical, have many account numbers for the same person **DO NOT LIST EACH ACCOUNT SEPARATELY.** List the creditor once, but write down all of the account numbers in the space provided for the creditor. If you don't have addresses for the creditors, they can often be found on the internet or on your credit report. The cost to add creditors to your case after filing is \$75.00 before the hearing and \$100.00 after the hearing. (This is the cost each time creditors are added, not the per-creditor cost.)

Below is a list of creditors often overlooked. Refer to it as an aid to help you list all of your debts.

Below is a list of creditors often overlooked. Refer	r to it as an aid to help you list all of your debts.
☐ If you have ever owned (bought or been given) any Real	debts and list your spouse. (Your spouse will still be liable
Estate (home, building lot, vacant land etc.) list the names	for any debts you have together).
and addresses of any mortgage company not paid in full.	☐ You owe medical bills. List all even if insurance is going
☐ You have sold anything where someone is making you	to pay a portion of the bill.
payments and you still owe money on what you sold.	☐ You owe any taxes or tax-like contributions: IRS, Utah
☐ Your home loan a "VA" loan. (Guaranteed by the	(or any other state), property, vehicle, Dept of Workforce
Veterans Administration) List the VA as a creditor.	Services among others.
☐ Student loans or have you borrowed any money to pay for	☐ You have something in your possession that belongs to
your education that has not been paid off.	someone else. You owe them any money for selling it?
☐ You have had a foreclosure or given a "Deed in Lieu" of	☐ You have written checks that have bounced or are going
foreclosure for any home or land. List all lenders. List any	to bounce. You have written any checks to any "Post-Dated
lender who agreed to reduce their debt in a "short sale" of	Check" lender.
your property.	☐ Have you closed, or has the account been closed by the
☐ Anything ever repossessed? List company or individual	bank any checking or savings account where you owe
who was financing the item repossessed and the dealer, if	money?
any.	☐ You have been served any legal papers. **YOU MUST
☐ Anyone garnishing your paycheck or anyone who had	BRING IN ANY PAPERS YOU HAVE BEEN SERVED**
attached your bank accounts or accounts receivable.	☐ You have a spa or health club membership that you owe
☐ You have been in an automobile accident where you were	money on.
at fault or where you had no insurance. List other driver,	☐ You are financing the purchase of any TV, stereo,
passengers in other car, passengers in your car and/or the	furnishings, appliances or vehicles, list all creditors, even if
owners of any building damages or sign/light pole	you are going to keep paying the debt. List the name of the
destroyed. List any and all insurance companies you know	company financing and the dealer you bought the vehicle
of (other than yours)	from if applicable.
☐ You have cosigned on anyone's debt that has not been	☐ Any executory contracts (orthodontic or any contract
paid in full. List the lender and the person for whom you	where both parties have something left to do on).
cosigned.	☐ You are renting or leasing anything. Write the name of the
☐ Someone cosigned for you on a debt that has not been	landlord or creditor. Also include present and former
paid in full. List the person that signed and the lender.	landlords for the past 4-6 years.
☐ You owe any money to any ex-spouse (Past due Child	☐ You have borrowed any money from any friends, family
Support, Alimony, debts, etc.) or your divorce decree states	or relatives.
that you are responsible for debts from the marriage. **YOU	☐ List all debts that have been "written off".
MUST BRING IN A COPY OF YOUR DIVORCE	☐ List any debt that was reduced by a creditor if you paid
DECREE**	them a lump sum.
☐ If you have ever cohabited, lived or been a room-mate with anyone list if there is any outstanding debt or if they	☐ List any debt that was "forgiven" by a creditor.

		Your Name	
		T	<u> </u>
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Amount Owed Date Incurred Name of Cosigner Value of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr RA RE SR
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of Cosigner	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr
A STATE OF THE STA		Value of Collateral	RA RE SR
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of Cosigner	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr
		Value of Collateral	RA RE SR
Creditor Name, Address:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD
Account Number:		Name of Cosigner	D C U Lien Sr
		Value of Collateral	RA RE SR

		Your Name	
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of Cosigner Value of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr RA RE SR
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of Cosigner Value of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr
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		Your Name	
	T		
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Amount Owed Date Incurred Name of Cosigner Value of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr RA RE SR
Creditor Name, Address:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U
Account Number:		Cosigner	Lien Sr
		Value of Collateral	RA RE SR
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr
Account Number.		Value of Collateral	RA RE SR
Creditor Name, Address:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML
Account Number:		Amount Owed Date Incurred Name of Cosigner	TD D C U Lien Sr
		Value of Collateral	RA RE SR

		tour Name	
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of Cosigner	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr
		Value of Collateral	RA RE SR
Creditor Name, Address:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML
		Amount Owed Date Incurred	TD D C U
Account Number:		Name of Cosigner	Lien Sr
		Value of Collateral	RA RE SR
Creditor Name, Address:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML
		Amount Owed Date Incurred	TD
Account Number:		Name of Cosigner	D C U Lien Sr
		Value of Collateral	RA RE SR
Creditor Name, Address:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML
		Amount Owed Date Incurred	TD D C U
Account Number:		Name of Cosigner	Lien Sr
		Value of Collateral	DADECD

		Your Name	
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of Cosigner Value of Collateral	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr RA RE SR
Creditor Name, Address: Account Number:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred Name of Cosigner	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U Lien Sr
		Value of Collateral	RA RE SR
Creditor Name, Address:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD
Account Number:		Name of Cosigner Value of Collateral	D C U Lien Sr RA RE SR
Creditor Name, Address:	Creditor Attorney or Collection Agent	Nature of Debt or List of Collateral Amount Owed Date Incurred	M F SR GSD CC PN U DC DB S GISL J P OD L PML NPML TD D C U
Account Number:		Name of Cosigner Value of Collateral	Lien Sr RA RE SR

REAL PROPERTY WORKSHEET

Please list ALL real estate that you own or are buying (including, but not limited to your home, any house, building lot, cabin, condominium, commercial property, any rental property, etc.) ALSO include on this list any real estate that you put into a trust in the past 15 years. (Also bring in the Trust Deed Note and most recent property tax notice for all real estate listed below.)

Description of real property and address	Lien-holder	Value	Default (amount lien-holder says you are behind, if any.

PERSONAL PROPERTY WORKSHEETS

List all personal property of any kind. If property is being held for you by someone else, state the name and address below. (See last page for help in estimating the value of your things.)

Cash on hand		\$		
List all open chec	\$			
		\$		
List all Security D	reposits (Landlords, Utilities etc.)	\$		
LIEN HOLDER	HOUSEHOLD GOODS	<u>USED</u> Value		
	Food and Provisions		А	
	Food storage		С	
	Beds and Bedding		E	
	Range or Stove (not built in)		А	
	Dishwasher (not built in)		А	
	Microwave		А	
	Washer		Α	
	Dryer		Α	
	Sewing Machine		Α	
	Freezer and/or Refrigerator		Α	
	Rugs and Carpets (not permanently attached)		В	
	OTHER FURNISHINGS AND APPLIANCES			
	Kitchen table and chairs		b	
	Dining room set		b	
	Utensils, Cookware, Pots, Pans, Dishes		b	
	Tables (specify coffee, end etc.)		а	
	Chairs (rocking, recliner, easy-chair etc.) # of chairs		а	
	Chest of Drawers (how many)		а	
	TV's (how many)		a	
	VCR		a	
	Stereo (home, personal or portable) #of pieces		а	
	Lamps (how many)		a	
	Living-room furniture (how many pieces)		a	
	Vacuum Cleaner		а	
	Computer		а	
	Typewriter		a	

 Video Camera/Camcorder		a	
Radios (personal, clock, CB or HAM)		а	
 FAMILY BOOKS, MUSICAL INSTRUMENTS, ANIMALS			
Books (Hardbound, paperbacks, encyclopedia, etc.)		506C	
Musical Instruments used by family		506C	
Animals (Household pets)		506C	
Prints and Pictures (art-work, hung on your walls)			
Art produced by, or depicting you or your family		ix	
 Records, Tapes, Compact Disks			
Art Objects			
 Coin and/or Stamp Collections			
Clothing and wearing apparel (including costume jewelry)		D	
 Fine Jewelry			
 Heirloom/Sentimental property (including wedding rings)		506d	
 Health Aids (wheel chair, special beds etc.)		ii	
 Fishing/Camping equipment			
Guns			
Exercise/Sports equipment			
Camera/Photography equipment			
His Life Insurance (entire loan/cash value)		хi	
 Her Life Insurance (entire loan/cash value)		хi	
HIS 401-k (This is NOT property of the Estate)		xiv	
HER 401-k (This is NOT property of the Estate)		xiv	
HIS other type of retirement plan, including education IRA (show type)		Fed	
HER other type of retirement plan, including education IRA (show type)		Fed	
Alimony (you receive)		vii	
Child Support (you receive)		vi	
Disability, Illness, Unemployment benefits (cash you receive)		iii	
Medical, Surgical, Hospital benefits (cash you receive)		iv	
Veterans Benefits (cash you receive)		V	
Wages Earned but not yet paid	Unknown	103	25%
Bodily Injury Compensatory Damages (The estimated value of your settlement)		×	
 Insurance Money due from death of relative or spouse		78- 23-5	

 MACHINERY, FI	XTURES TOOLS	(Used in your busine	ess)	50	06
					,
 -					
 Power and hand	l tools NOT used	d in business			
Burial Plots				5	07
Public Assistance	e (Including AFI	DC, Food stamps, Ar	ny Social Security)	iii	
		eceive or estimated v		4:	22
Stock or Interes	st in Incorporate	ed business (Itemize) .		
 Interest in Parti	nerships, Joint V	entures or LLC (iten	nize)		
Bonds & Other	negotiable or no	n-negotiable instrun	nents (itemize)		
Promissory Note	es (payable to y	ou)			
 Liquidated Debt	s (Anyone that	owes YOU money, in	cluding A/R)		
 Anticipated Inco	me Tax Refund	/ Earned Income Cre	edit		
Equitable & Futi estate)	ure Interests, Li	fe Estates, Beneficia	ry in Trusts (non-real		
Inheritance Exp	ected (Name of	Deceased & type of	property expected)		
 Contingent Clair	ms, Counterclair	ms, Non-Compensate	ory Accident awards		
 Patents, Copyri	ghts, Trademark	s, Any Intellectual P	roperty		
 Licenses, Franci	nises, Any Intan	gible property			
Automobiles:					
 Year N	1ake	Model	Basis for value	5(3	06 3)
Year N	1ake	Model	Basis for value		
 Year N	1ake	Model	Basis for value		
Motorcycles:					
Year N	1ake	Model	Condition		
 Trailers (inclu	ding work-rela	ated, flat-bed and	Travel Trailers):		
Year N	1ake	Model	Condition		
 Boats, Motors	Boats, Motors and Trailers:				
Year N	1ake	Model	Condition		
Yard & Lawn-ca	re equipment				
Snow removal e	quipment				
Outdoor furnitu	re				
Portable Spa					

-	Barbeque and out door cooking e	equipment			
	Satellite dish				
	Aircraft & Accessories				
	Horses, cows, sheep, poultry, an	y other livestock (not pets)			
	Crops (growing or harvested)				
	Farming equipment and impleme	ents (itemize)			
	Farming supplies and chemicals	(itemize)			
	Office equipment and supplies (it	emize)			
	Business Inventory (Value of iter	ns for sale in your business)			
	Videos and DVDs				
	Water Softener				
	Dvd player, cd player, mp3, ipod electronics	, cell phone or any other unlisted			
	Entertainment Center				
	Bitcoin				
	Any other items of value				
	List all Real Property (Land) including your home:	that you own or are buying			
	What it is	Address	Value		
·					
I have reviewed the knowledge	amounts in the forgoing list of ass	sets and state that they are true and corClient		of my	
CIICIIL					_

USE THIS TO HELP YOU VALUE YOUR PERSONAL PROPERTY

You need to list everything you own (or are buying). The Law requires that you value these items at the amount it would cost you to replace your possessions if you purchased identical used items. You may use this table as a <u>suggestion</u> to help you place a value on your belongings. <u>BUT, IF YOU HAVE A DIFFERENT OPINION, YOU MUST MAKE THE DECISION.</u>

APPLIANCES (INCLUDING TV AND STEREO):

The <u>purchase price</u> of the appliance or item is to be used as a base against which you should apply the following percentages:

Less than <u>one</u> year old 80% One to *two* years old 65%

Two to *four* years old 50%

More than four years old 10%

FURNITURE:

The <u>purchase price</u> is to be used as the base against which you should apply the following percentages:

	Overstuff,	
	Metal and	
	Softwood	Hardwood
	<u>Furniture</u>	<u>Furniture</u>
Less than <u>one</u> year old	75%	75%
One to <u>two</u> years old	50%	70%
Two to <i>four</i> years old	25%	50%
More than four years old	10%	25%

INCOME

If married, but filing single, or living together and sharing expenses, both columns MUST be completed or case could be dismissed

Debtor1 Employed Yes No Occupation:	Debtor2 Employed Yes No Occupation:
Name of Employer:	Name of Employer:
Address:	Address:
Date employment began:	Date employment began:
=======================================	
 _	<u>EARNINGS</u>
	Debtor1 Debtor2
MONTHLY GROSS income (wages, salary, commis	ssions)
stimated monthly overtime	· · · · · · · · · · · · · · · · · · ·
Subtotal	· · · · · · · · · · · · · · · · · · ·
ess Deductions from paycheck:	
Tax Withholding, Medicare, Social S	Security
Mandatory Retirement Contributions	3
Voluntary Retirement Contributions	
Retirement Loan Repayments	· · · · · · · · · · · · · · · · · · ·
Insurance	· · · · · · · · · · · · · · · · · · ·
Child Support/Alimony	· · · · · · · · · · · · · · · · · · ·
Union Dues	· · · · · · · · · · · · · · · · · · ·
Other Deductions. Specify	
Total Payroll Deductions	
OTAL "TAKE-HOME" PAY	· · · · · · · · · · · · · · · · · · ·
OTHER INCOME	
Net income from rental property and	I from operating a business
	ttlements
	is stamps, housing, etc)
Other Monthly Income	

TOTAL MONTHLY INCOME	····· 			
All other contributions to paying expenses (include contributions from an				
unmarried partner, members of your household, dependents, roommates, o				
friends or relatives)Specify:				1 *
Describe any increase or decrease in income reasonably anticip		-	ving the fi	ling of
your petition:				
Do You Have Dependents? NO YES. Fill out this information for	or each depend	lent		
Dependents relationship to Debtor1 or Debtor2 De	·		ident Live \	Nith You?
Son or Daughter		Yes N	0	
			0	
			lo	
		V A	lo	
Do your expenses include expenses of people other than yourself If a joint petition is filed and parties are separated, EACH parties MONTHLY EXPEN	ty must compl			<u>oenses</u>
If a joint petition is filed and parties are separated, EACH page	ty must compl	ete separate	list of exp	oenses Office
If a joint petition is filed and parties are separated, EACH page	ty must compl			T
If a joint petition is filed and parties are separated, EACH page MONTHLY EXPEN	ty must compl	ete separate	list of exp	T
If a joint petition is filed and parties are separated, EACH parties MONTHLY EXPENSIONS. First Mortgage (Or monthly Rent payment or Lot Rent)	ty must compl	ete separate	list of exp	T
If a joint petition is filed and parties are separated, EACH parties MONTHLY EXPENSION First Mortgage (Or monthly Rent payment or Lot Rent) Real Estate Taxes	ty must compl	ete separate	list of exp	T
If a joint petition is filed and parties are separated, EACH parties are separated, EACH parties are separated, EACH parties MONTHLY EXPENSIVE MONTHLY EXPEN	ty must compl	ete separate	list of exp	T
First Mortgage (Or monthly Rent payment or Lot Rent) Real Estate Taxes Homeowners, renters insurance Home maintenance, repair, and upkeep	ty must compl	ete separate	list of exp	T
If a joint petition is filed and parties are separated, EACH parties are separated are	ty must compl	ete separate	list of exp	T
If a joint petition is filed and parties are separated, EACH part MONTHLY EXPENSION First Mortgage (Or monthly Rent payment or Lot Rent) Real Estate Taxes Homeowners, renters insurance Home maintenance, repair, and upkeep Homeowners association or condo dues Additional Mortgage Payments (home equity, 2 nd Mtg)	ty must compl	ete separate	list of exp	T

Other Utilities:

Food and Housekeeping Supplies

Clothing, Laundry and Dry Cleaning
Personal care products and services
Medical, dental and vision expenses

Childcare and children's education costs

Transportation (include gas, maintenance, bus/train fare, not car payments)

Entertainment, clubs, recreation, newspapers, magazines, books

Charitable Contributions				
Life Insurance (not deducted from paycheck)				
Health Insurance (not deducted from paycheck)				
Vehicle Insurance				
Other Insurance: Specify				
Taxes (not real estate or payroll)				
Car Payment				
Car Payment				
Other Secured Debt Payment				
Child Support or Alimony not deducted from paycheck				
Other payments to support those not living with you				
Mortgage on investment properties (include ins, taxes, maintenance, HOA)				
Other expenses: Specify				
Total Monthly Expenses				
Any substantial increase or decrease expected to expenses within 1 year (house pay	ment chan	ige, car pa	aid off?	
I/we have reviewed this budget and state that these are my/our living expenses				
, Debtor1		Debtor2		

CLIENT QUESTIONNAIRE

Male Name	SSN	Birth date
Female Name	SSN	Birth date
STATEME	NT OF FINANCIAL A	FFAIRS
This statement is to be completed by on which the information for both spouses is combining information for both spouses whether or not a joint not filed. An individual debtor engaged in business should provide the information requested on this staffairs.	ned. <i><u>If the case is filed und</u> <u>petition is filed, unless the</u> as a sole proprietor, partne</i>	e spouses are separated and a joint petition is er, family farmer or self-employed professional,
Questions 1-18 are to be completed below, also must complete Questions 19-25. If the If additional space is needed for that answer to any case name and the number of the questions.	answer to an applicable qu	
partnership. An individual debtor "in business" for the years immediately preceding the filing of this bankror owner of 5 percent or more of the voting or equitipartnership; a sole proprietor or self employed.	he purpose of this form if t uptcy case, any of the follo ty securities of a corporation es but is not limited to: relanded debtor is an officer, direct	owing: an officer, director, managing executive, on; a partner, other than a limited partner, of a atives of the debtor; general partners of the cor, or person in control; officers, directors and
None		
1. Income from employment or	peration of business.	
State the gross amount of income the debtor hoperation of the debtor's business from the bestate also the gross amounts received during that maintains, or has maintained, financial refiscal year income. Identify the beginning and state income for each spouse separately.	ginning of this calendar the two years immediate cords on the basis of fise	year to the date this case was commenced. ely preceding this calendar year. (A debtor cal rather than a calendar year may report
MALE YTD INCOME SOL	JRCE FEMALE YTD	INCOME SOURCE
20		
20		
20		

None				
of the debto		by the debtor oth	er than from employment, tely preceding the commen	trade, profession, or operation acement of this case. Give
20	MALE YTD INCOME	SOURCE	FEMALE YTD INCOME	SOURCE
20				
None				
	3. Payment to creditors.		purchases of good or serv	ices, and other debts.
aggregating of this case.	more than \$600.00 to an			y preceding the commencement
NAME OF CF	REDITOR DATE OF PAYM	ENT	AMOUNT PAID	AMOUNT OWING
any creditor	b. Debtor whose debts a within 90 days of \$5,000		consumer debts: List all pa	yments or any other transfer to
for the bene			r immediately preceding th riend, relative, business as	ne commencement of this case associate)
NAME OF CF	REDITOR(AND RELATIONS	SHIP)	DATE OF PAYMENT AMO	DUNT PAID AMOUNT OWING

a. List all sui	tive proceedings, executions, gard ts and administrative proceedings of the filing of this bankruptcy case	to which the debtor is	nents. s or was a party within one
CAPTION SUIT	NATURE OF SUIT	COURT	STATUS OF SUIT
None			
• •	ty that has been attached, garnisly preceding the commencement o		ny legal or equitable process
CREDITOR	DATE OF SEIZURE		ON AND VALUE OF PROPERTY
CREDITOR	DATE OF SEIZORE	DESCRIPTION	ON AND VALUE OF PROPERTY
None			
5. Repossessions, forecl	osures and returns		
List all property that has be	en repossessed by a creditor, solo ed to the seller, within one year i		
CREDITOR(OR SELLER) D	ATE OF REPOSSESSION OR RETU	RN DESCRIPTION	N AND VALUE OF PROPERTY
None			
☐6. Assignments and reco	eiverships.		
a. Describe ar	ny assignment of property for the commencement of this case.	benefit of creditors ma	ade within 120 days
NAME OF ASSIGNEE	DA	TE OF ASSIGNMENT	TERMS OF ASSIGNMENT

b. List all property which with one year immediately preceding the				r, or court appointed official
NAME/ADDRESS OF CUSTODIAN	COURT/CA	ASE NUMBER	DATE OF ORE	DER DESCRIPTION
None				
7. Gifts.				
List all gifts or charitable contributions case except ordinary and usual gifts to member and charitable contributions ag	family member	ers aggregating	less than \$200 i	
NAME OF PERSON/ORGANIZATION REL	ATIONSHIP		DATE	DESCRIPTION OR VALUE
None				
8. Losses List all losses from fire, theft, or other commencement of this case or since the				ately preceding the
DESCRIPTION/VALUE OF PROPERTY	CIRCUMST	ANCES(INSUR	ED?)	DATE OF LOSS
None 9. Payments related to debt counse	eling or bankrı	intev.		
List all payments made or property transfor consultation concerning debt consolibankruptcy within <u>ONE YEAR</u> immediate	sferred by or idation, relief	on behalf of th under the bank	cruptcy law or pre	eparation of a petition in
NAME OF PAYEE	DATE OF P	PAYMENT	WHO PAID?	AMOUNT PAID OR DESCRIPTION
None			-	
10. Other transfers.				
a. List all property, other financial affairs of the debtor, transferred preceding the commencement of this cases **Use separate sheets if necessary**	ed either abso			
NAME & ADDRESS OF TRANSFEREE (Re	lationship)	DATE	DESCRIBE PR	ROPERTY TRANSFERRED

b. List all property trai you are the beneficiary	nsferred within <u>TEN YEARS</u> to a	a self-settled trust or similar device of which
NAME OF TRUST/DEVICE	DATE OF TRANSFER	AMOUNT, DESCRIPTION OF PROPERTY, VALUE AND YOUR INTEREST IN PROPERT
None		
11. Closed financial accounts.		
were closed, sold or otherwise trans checking, savings, or other financial	ferred within one year preceding accounts, certificates of deposi	debtor or for the benefit of the debtor which g the commencement of this case. Include it, or other instruments; shares and share ciations, brokerage house and other financial
NAME & ADDRESS OF INSTITUTION	TYPE OF ACCOUNT	DATE OF CLOSING
ACCOUNT NUMBER ACCO	DUNT BALANCE	
None		
12. Safe deposit boxes.		
		had securities, cash, or other valuables withir
BANK OR DEPOSITORY WHO HAS	ACCESS TO BOX CONTENT	'S TRANSFER OR SURRENDER DATE
None		
☐ _{13. Set-offs.}		
List all set-offs made by any credito preceding the commencement of thi		ebt or deposit of the debtor within 90 days
NAME OF CREDITOR	DATE	AMOUNT OF SET-OFF
None		
14. Property held for another pe		controls.
NAME/ADDRESS OF OWNER	DESCRIPTION/VALUE OF	PROPERTY LOCATION OF PROPERTY

None			
15. Prior address of debtor.			
If the debtor has moved within the <u>THRE</u> premises which the debtor occupied during joint petition is filed, report also any separate presents of the premises which the debtor occupied during the premises which the premises where the premises which the premises which the premises which the premise	g that period and vacat	ed prior to the co	
ADDRESS	NAME (JSED	DATES OF OCCUPANCY
None			
16. Spouses and former spouses.			
If the debtor resides in a community proportion of the California, Idaho, Louisiana, Nevada, New year period immediately preceding the column any former spouse who resides or resided	Mexico, Puerto Rico, Tommencement of this ca	exas, Washington, se, identify the na	or Wisconsin) within the eight me of the debtor's spouse and
NAME			
None			
17. Environmental Information. For the purpo	ose of this question, the follo	wing definitions apply:	:
"Environmental Law" means any federal, state, or lo toxic substances, wastes or material into the air, lan or regulations regulating the cleanup of these substa "Site" means any location, facility, or property as de operated by the debtor, including, but not limited to "Hazardous Material" means anything defined as a h contaminant or similar term under an Environmenta	d, soil, surface water, groun ances, wastes, or material. fined under any Environmen , disposal sites. azardous waste, hazardous	dwater other medium, tal Law, whether or no	including, but not limited to, statutes of presently or formerly owned or
ATTACH A LIST FOR ANY THAT APPLIES			
a. List the name and address of ever may be liable or potentially liable under or in violation if known, the Environmental Law.			writing by a governmental unit that it ental unit, the date of the notice, and,
SITE NAME/ADDRESS	GOVERNMENTAL UNIT	DATE	ENVIRONMENTAL LAW
b. List the name and address of ever Hazardous Material. Indicate the governmental unit			
SITE NAME/ADDRESS	GOVERNMENTAL UNIT	DATE	ENVIRONMENTAL LAW
c. List all judicial or administrative to which the debtor is or was a party. Indicate the n the docket number.	proceedings, including settle ame and address of the gove	ments or orders, unde ernmental unit that is	r any Environmental Law with respect or was a party to the proceeding, and
NAME/ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER STATUS	OR DISPOSITION	
18. Have you been any of the partner, or managing executive of a corporate of the voting or equity securities of a	ration or partnership, a	self employed pr	
YES NO If you answered questionnaire to complete at the end of the	d "YES" to any of quest is questionnaire. If "N		

19. Do you own or have possessi identifiable harm to public health or s		poses or is alleged to pose a thr	eat of imminent and
I have reviewed the for Associates, and declare that the answ		n changes made by personnel of to the best of my knowledge ar	
Date	CLIENT		
		<u> </u>	
BUSINESS QUESTIONNAIRE (Complete separate questionnaire for	CLIENT EACH business venture	if more than one)	
NAME OF BUSINESS TAXPAYER ID SSN	ADDRESS	NATURE OF BUSINESS	DATES OPERATED
Is your business "Single Asset Real E most of your income and you conduct			
List the name and addressing of books and		nd accountants who, within <u>TWC</u>	O YEARS , kept or
List the names and add the business in the last <u>TWO YEARS</u>		riduals who have audited the bo	oks and records of
List the names and add business.	ress of any firm or perso	n who had possession of any bo	oks or records of the
List all financial instituti last <u>TWO YEARS</u> .	ions, creditors and other	parties who you issued financia	I statements in the
List the date of the last DATE OF INVENTORY	two inventories taken of INVENTORY SUPER	property of the business. VISOR AMOUI	NT (Cost or Market)
List the name and addre	ess of firm or person hav	ing possession of each inventor	y reported above.