

DEBTOR INFO:

How did you first hear about my office? _____ Office Location _____

Debtor's Full Legal Name: _____

SS# _____ DOB: _____

Spouse's Full Legal Name: _____

SS# _____ DOB: _____

Other Names Ever Used: _____ Email: _____

Tel#: _____ Cell#: _____ Emergency Contact (name & number): _____

Debtor's Home Address: _____ Debtor's Mailing Address: _____

City State Zip County City State Zip County

BANKRUPTCY HISTORY:

Have you ever filed bankruptcy before? Location where BR filed _____ Date filed _____
 Case no: _____ Chapter: _____

For Chapter 7

-Have you received a Chapter 7 discharge in a case filed within the last 8 years? _____
 (If so, debtor is not eligible for a Chapter 7 but might be able to file a Chapter 13)
 -Have you received a Chapter 7 discharge within the last 4 years in a case filed within the last 4 years? _____
 (If so, can't get a discharge in a 13 but can file a 100% plus contract interest on all debts)
 Have you received a Chapter 13 discharge in a plan that is less than 70 percent? -----If so, not eligible for chapter 7
 for six years from the date of filing.

For Chapter 13

-Have you received a Chapter 13 discharge in a case filed within the last 2 years? _____
 (If so, can't get a discharge in a 13 but can file a 100% plus contract interest on all debt)
 -Have you had any Chapter 13 cases dismissed within the last year _____ If so, When? _____
 What was the reason for dismissal _____ (We may not be able to reimpose the stay)

STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business

	Debtor	Spouse
Current year to		
Last Year		
Two years ago		

2. Income other than from employment or operations of business (specify source, husband or wife if married debtor, beginning and ending dates of fiscal year if there are any) _____

3. a. Have you paid any single creditor a lump sum of more than six hundred dollars within the last 90 days? If so, who? _____

b. Have you paid back any personal loans given by friends or family within the past year?

4. a. Do you have any pending lawsuits? _____ Case # _____ What was the nature of the proceeding? _____ Court _____ Creditor _____ Status or Disposition _____

b. Are you currently being garnished? _____ Creditor: _____ Address of creditor _____ Seizure dates _____ Description and value of property _____

5. a. Has any creditor repossessed any of your vehicles within the last year?

Name of Creditor	Year, make, and model of vehicle	Value	Date of Repo
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b. Do you own any houses or land that are currently in foreclosure or have been foreclosed in the past six months? (Note to staff: All foreclosure cases must be put in a red folder and written on board)

Name of Creditor and Law Firm	Address	Value and Description of Property	Date of Foreclosure
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7. Have you given away any gifts worth more than \$200 in the past year? _____ If so, to whom? _____ What is their relationship to you? _____ When was the gift given? _____ Please describe the gift and its exact cost _____

8. Have you incurred any losses from fire, theft, other casualty or gambling within the past year? Please give a description and value of property _____

Description of circumstances _____ Was the loss covered in whole or in part by insurance? _____ Date occurred _____

9. Payments related to debt counseling or bankruptcy: **RECIPIENT: LAW OFFICE OF JEFFREY B. KELLY. VALUE AND DESCRIPTION: TO FILE CHAPTER _____ (_____ FILING FEE, 49 FIRST CREDIT COUNSELING FEE, 0 / 19 / 38 SECOND CREDIT COUNSELING FEE, 20 TAX TRANSCRIPTS, _____ ATTORNEY'S FEES)** [Note to staff: do not include second credit counseling fee if it is a Chapter 13. If there is more than one person filing a Chapter 7, the second CC fee will be 38 dollars rather than 19.]

10. Have you sold or signed away any property in the last 2 years? _____ If so, list a description of the property _____ Estimated value _____ Relationship of the buyer to you _____ Sales Price _____

11. If you have closed any bank accounts within the past year, please fill out the information:

Name of Bank	Type of Account	Closing Balance	Last 4 digits of account	Date
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12. Have you had a safe deposit box in the past year? _____ If so, where is it located? (need address and institution) _____ If anyone else has access to this box, please list their name and address _____ Description of the contents _____ Date of Transfer or surrender _____

14. Do you currently possess any property that does not belong to you? (Example: Are you driving someone else's car?)

Owner	Address of Owner	Description and Value of Property	Location of Property
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15. Have you lived at any other addresses within the last three years? (List dates of occupancy and addresses)

STAFF USE: If the client has lived in another state over the past three years, which state has s/he spent the most time in? _____

Be sure to change this state in the Voluntary Petition under the "Filing Information" tab BEFORE exempting property on Schedules A and B.

ADDITIONAL QUESTIONS:

1. Have you received any cash advances in the amount of \$750 or more within the last 70 days? _____

2. Have you incurred any new type of debt within the last six months, including but not limited to, balance transfers on credit cards, regular charges, cash advances or loans? _____ If so, please list creditor names and amounts: _____

3. Do you have any child support obligations? _____ If so, are you current on your payments? _____ Who do you make the payments to? (list the name, address, and phone number) _____

4. Please list your current marital status _____ Have you ever been divorced? _____ If so, does the divorce decree order you to pay any specific debts? _____ Do you know if your ex spouse has ever filed for bankruptcy? _____ If so, who was his/her attorney? _____ (check for conflict)

5. Have you filed all of your tax returns within the last four years? _____

6. Have you purchased any vehicles within the last 2.5 years?

Date of purchase _____
year/make/model _____

7. Do you have any leases or rent to own contracts like a Rent-A-Center or a car lease?

Name of Creditor	Address	City, State, Zip	Collateral
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REAL PROPERTY: (Schedule A)

BANKRUPTCY LAWS REQUIRE THAT YOU LIST ALL OF YOUR ASSETS IN YOUR PETITION, FAILURE TO LIST ASSETS CAN RESULT IN THE DISMISSAL OF YOUR CASE AND CRIMINAL PROSECUTION

Do you own any land, houses, or mobile homes? _____

If so, please give a brief description _____

How much is the property worth? _____ How much is owed? _____ What is the name of the mortgage company _____ Is there a cosigner? _____ If so, please list the full legal name and mailing address of the cosigner. _____

PERSONAL PROPERTY: (Schedule B)

1. Please list all vehicles that are in your name or that you have cosigned for:

year/make/model	Monthly Payment	Worth	Debt	Creditor	Name and address of co-signer
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year/make/model	Monthly Payment	Worth	Debt	Creditor	Name and address of co-signer
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year/make/model	Monthly Payment	Worth	Debt	Creditor	Name and address of co-signer
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2. Please list all bank accounts, credit union accounts 401k plans, retirement funds, security deposits, etc. by name of bank or company holding account and ownership of account by husband (H) or wife (w) or jointly held by both (J).

	H/W/J?	Balance	Location		H/W/J?	Balance	Location
Cash				401K			
Checking				IRA			
Other Checking				Other Retirement			
Savings				Other			
Income Tax Refund Due				Other			
Stocks				Other			
Certificate of Deposit				Safety Deposit Box			

3. HOUSEHOLD GOODS: Please estimate the value of the following assets using a Yard Sale Value:

<u>Bedroom</u>	<u>Living Room</u>	<u>Dining Room</u>	<u>Kitchen</u>	<u>Lawnmower</u>	<u>TV/VCR/DVD</u>	<u>Stereo</u>	<u>Washer/Dryer</u>
<u>Yard Equip.</u>	<u>Computer Equip.</u>	<u>Clothing</u>	<u>Jewelry</u>	<u>Photo Equip.</u>	<u>Guns</u>	<u>Boats</u>	<u>Four-wheelers</u>
<u>Fishing Equip.</u>	<u>Golf Equip</u>	<u>Campers</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>		

4. Have you received or do you expect to receive a tax refund this year? _____ When? _____ How Much? _____

EMPLOYMENT INFORMATION:

Debtor's Job Title: _____ Spouse's Job Title: _____

Employer's Name: _____ Employer's Name: _____

Payroll Address: _____ Payroll Address: _____

City State Zip City State Zip

Employer's Phone #: _____ Employers Phone #: _____

How have you been employed with them? _____ Your Spouse? _____

2. Please list the age and nature of relationship of all your dependents: _____

3. How often do you get paid? (Circle one): *Weekly, bi-weekly, monthly.* Your Spouse? *Weekly, bi-weekly, monthly*

What is your average net income for each pay period? _____ Your Spouse? _____

	DEBTOR	SPOUSE
MONTHLY GROSS		
TAXES		
INSURANCE		
401K CONT.		
401K LOAN		
CHILD SUPPORT		
OTHER DEDUCTION		
MONTHLY AVERAGE		

4. Do you have any other source of income? _____ If so, please list all. Examples include: Self employment, part-time income, rental income, retirement, social security, disability, worker's compensation, veteran's benefits, food stamps, welfare, child support, interest and dividends, and, alimony, or any other.

CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) (Schedule J)

List monthly living expenses:

_____ Rent/Mortgage (circle one). Does mortgage include taxes and home insurance? Yes / No

_____ Second Mortgage

_____ Lot Rent

_____ Recreation

_____ Alimony and Support paid to others

_____ Electricity

_____ Charitable Contributions

_____ Expenses from business,
profession, farm

_____ Water

_____ Homeowners or Renters
Insurance

OTHER EXPENSES:

_____ Telephone

_____ Life Insurance

_____ Hair Care

OTHER UTILITIES:

_____ Health Insurance

_____ Daycare for children

_____ Cell Phone

_____ Auto Insurance

_____ Other (Please Specify)

_____ Gas (For House)

_____ Other Insurance

_____ Cable

_____ Internet

**OTHER TAXES (NOT DEDUCTED FROM PAYCHECK
OR IN HOME MORTGAGE PAYMENTS)**

_____ Other

_____ Self Employment Taxes

_____ Home Maintenance

_____ Property taxes

_____ Food

_____ Other

_____ Clothing

**INSTALLMENT PAYMENTS FOR CHAPTER 7 CLIENTS ONLY AND/OR PAYMENTS FOR
NONFILING SPOUSE: (note to staff: payments for nonfiling spouse are for Ch 7 OR 13. For these, be sure to
specify when payment ends)**

_____ Laundry

Creditor _____ Payment _____

_____ Medical

Creditor _____ Payment _____

_____ Gas (for car)

Creditor _____ Payment _____

CHAPTER 7 DISCLAIMER SHEET THAT MUST BE SIGNED BEFORE ANY SIGN APPOINTMENT IS MADE

I _____, understand that if I have signed away any interest in a mobile home, house, car or anything else of value to anyone within the past two years, it must be listed in my Chapter 7. I understand that the Chapter 7 Trustee can take away anything of significant value that I have given away prior to filing.

I understand that if I own something like a house or anything else of value and I fail to list it as an asset in my Chapter 7 case, the trustee is going to take it away from me, sell it, and give the proceeds to my creditors.

I understand that if I have inherited anything from anyone within the last five years, I must get a copy of the will to the Law Office of Jeffrey B. Kelly before we file the case and must list anything that I have inherited on the bankruptcy petition.

I understand that if I am involved in any type of estate or expect to inherit anything from any estate, the trustee can take it away, sell it and pay my creditors.

I understand that the Law Office of Jeffrey B. Kelly will not take my Chapter 7 case if I have incurred any new debt six months prior to the filing of my case.

If you have repaid any loans to any family members with the last two years, the trustee can sue that family member to recover whatever you paid them.

I understand that failure to list any asset or right to receive money from any estate can result in criminal prosecution by the bankruptcy court.

Understood this ____ day of _____, 2010

Secured Debts:

Creditor: _____ Purchase Date: _____ Payment: _____

Account Number: _____ Collateral: _____

Arrears: _____ FMV: _____ Amount Owed: _____

Creditor: _____ Purchase Date: _____ Payment: _____

Account Number: _____ Collateral: _____

Arrears: _____ FMV: _____ Amount Owed: _____

Creditor: _____ Purchase Date: _____ Payment: _____

Account Number: _____ Collateral: _____

Arrears: _____ FMV: _____ Amount Owed: _____

Creditor: _____ Purchase Date: _____ Payment: _____

Account Number: _____ Collateral: _____

Arrears: _____ FMV: _____ Amount Owed: _____

Creditor: _____ Purchase Date: _____ Payment: _____

Account Number: _____ Collateral: _____

Arrears: _____ FMV: _____ Amount Owed: _____

Creditor: _____ Purchase Date: _____ Payment: _____

Account Number: _____ Collateral: _____

Arrears: _____ FMV: _____ Amount Owed: _____