Bankruptcy Questionnaire

Attached is the information we need to complete your bankruptcy petition. Please completely and accurately fill out the attached worksheet. Do not leave any blank spaces. If a question does not pertain to your situation, put "none."

The information you give us will be used to complete your official bankruptcy petition for filing in federal Bankruptcy Court. The information must be accurate. Making a false statement on a bankruptcy petition, or omitting or concealing assets can subject you to fine, imprisonment, or both.

We can only help you with a Chapter 7 filing (also known as "straight" or liquidation bankruptcy) or a Chapter 13 (a pay back plan).

Please provide me with copies of the following documents. The most important documents to get started are the tax returns and pay stubs. Not every document is needed in every case; so if you do not have something, please do not worry. We may be able to proceed without it.

- 1) Last seven months of proof of income for each wage earner; this includes paystubs, social security, child support, spousal support, gifts, or lump sum receipts.
- 2) Last two years of state and federal tax returns for chapter 7 cases, including W-2s.
- 3) Last four years of tax returns for chapter 13 cases, including W-2s. If you do not have them all, call me for alternatives.
- 4) Last six months of bank and/or credit union statements.
- 5) The most recent bill or collection notice for each creditor, if you have it.
- 6) A copy of your credit report.
- 7) Most recent property tax statement if you own a house or land.
- 8) Vehicle registration or title **and** proof of insurance, for all vehicles.
- 9) Print out of Kelly Blue Book (trade-in value of fair) or NADA of all vehicles titled in your name.
- 10) 401K, pension plan or IRA statement showing balance in each account.
- 11) Credit Counseling Certificate from an approved credit counseling agency. (debtorcc.org; debtoredu.com or cricketdebt.com)
- 12) If self-employed, monthly break-down of all business income and expenses for prior seven months

I certify that to the best of my knowledge I have provided complete and truthful answers in this questionnaire package and understand that my lawyers cannot help me without such information. I do not hold my lawyers responsible for knowing anything that I did not include in this questionnaire.

| Please let us know your preferred method of contact for documentation: | | | | | |
|--|----------------|--|--|--|--|
| Email □ | Mail □ Other □ | | | | |
| Printed Name: | Printed Name: | | | | |
| Signature: | Signature: | | | | |
| Date: | Date:_ | | | | |

BANKRUPTCY QUESTIONNAIRE

DEMOGRAPHICS:

| Full na | nme: | FIRST | MIDDLE | LAST | | | | |
|---------|---|--|---------------------|------|--|--|--|--|
| A. | Debtor (Husband, if ma | arried): | | | | | | |
| SSN#_ | | _Date of Birth: | Driver's License | No: | | | | |
| | | | | | | | | |
| Joint D | Joint Debtor (Wife, if married): | | | | | | | |
| SSN#_ | | _Date of Birth: | Driver's License | No: | | | | |
| Email | addresses: | | | | | | | |
| B. | | in past six years? Yes / No (do r | | | | | | |
| C. | Business Name(s): | | | | | | | |
| D. | Home Street address: | | | | | | | |
| E. | Mailing address: | | | | | | | |
| | How long have you been living in this state?You must be in the state for at least 90 days prior to filing bankruptcy. | | | | | | | |
| | Debtor work # | Joint Debtor | work # | | | | | |
| | Home # | Cell phone, m | nessage or emergeno | ey # | | | | |
| | County of residence: | | | | | | | |
| F. | | one number of someone who within five years: | | | | | | |
| G. | Marital Status: Single, | Married, Separated, Divorced:_ | | | | | | |
| | Children or Dependent | s that RESIDE with you (Name | s and Ages): | | | | | |
| | Name: | | Age: | | | | | |
| | Name: | | Age: | | | | | |
| | Name: | | Age: | | | | | |
| | Name: | | Age: | | | | | |
| | Name: | | Age: | | | | | |
| | Name: | | Age: | | | | | |

PREVIOUS BANKRUPTCY?

| Prio | r bankruptcy filed? Yes / No If yes, whe | ere? | | | |
|------|---|--|--|--|--|
| Yea | r filed and month: | Discharge obtained? | | | |
| Case | e number, if known: | Chapter filed: | | | |
| | 00 | CCUPATION(S) | | | |
| A. | Debtor's occupation is: (example - 7 | Teacher) | | | |
| | Where employed now? | How long employed? | | | |
| | Address of Employer: | _ | | | |
| | Pay period (IMPORTANT): month | nly/twice a month/every other week/weekly | | | |
| | Exact day(s) of the month you are p | aid | | | |
| | Exact take-home pay per pay period | or accurate average: \$ | | | |
| | Salary/hourly wage \$ | | | | |
| | Name and phone number of payroll clerk: | | | | |
| | | no, explain why not, including when it is higher tely how much. | | | |
| B. | Joint Debtor's occupation is (examp | ole - Teacher) | | | |
| | If not employed, do you anticipate e | employment, and when? | | | |
| | Where employed now: | How long employed? | | | |
| | Address of Employer: | | | | |
| | Pay period (IMPORTANT): monthly/twice a month/every other week/weekly | | | | |
| | Exact day(s) of the month you are paid: | | | | |
| | Exact take-home pay per pay period or accurate average: \$ | | | | |
| | Salary/hourly wage: \$ | | | | |
| | Name and phone number of payroll | clerk: | | | |
| | | no, explain why not, including when it is higher or lower and by | | | |
| C. | Are debts primarily business or con | sumer debts? | | | |

REAL PROPERTY

Real Property or Mobile Home: Does your name show up on deeds to any land or real property anywhere in the world? If so, please give the information below:

| A. Are you purchasing or do you own REAL PROPERTY? Yes / No |
|---|
| Please Circle One: Land with home or bare land, OR a Mobile Home with land or a Mobile Home in park. Address of property: |
| Tax Assessed Value (<u>necessary</u>): \$Year of assessment: |
| When purchased? Amount purchased for: |
| Your estimate of its full market value: \$ |
| Do you owe property taxes? Yes / No If yes, how much and for what year(s): |
| Are your property taxes included in your mortgage payment? Yes / No |
| Which County? |
| B. DO YOU WANT TO RETAIN HOME? YES / NO |
| First mortgage monthly payment: \$ Loan # |
| How much behind? \$Balance owed: \$Interest Rate: |
| Name and address of lender: |
| Foreclosure Date: (if any) |
| Second mortgage monthly payment: \$ Loan # |
| How much behind? \$Balance owed: \$Interest Rate: |
| Name and address of lender: |
| Foreclosure Date: (if any) |
| Third mortgage: add same information on attached sheet |
| C. Do you have another piece of real property? Yes / No If yes, attach sheet with above details. |
| BANK INFORMATION |
| A. Safe deposit box? Yes / No If yes, where? |
| What are contents? Any valuables? If yes, explain: |
| B. Bank Accounts: |
| Name of Bank Branch Savings/Checking Average Balance |
| 1 |

ASSETS

Your estimate value of the following (auction or garage sale value):

| A. | Do you have a security deposit with a utility or landlord? Yes / No |
|----|--|
| | How much is refundable and with whom? |
| B. | Household goods / including audio, video, and computer equipment |
| | books, pictures, art objects, antiques, stamp, coin, record, tape, cd, or other collections |
| | wearing apparel: |
| | furs and jewelry: |
| | sports, photographic, and other hobby equipment: |
| C. | Do you own any GUNS? Yes / No If yes, list each one. Describe whether it is a rifle, shot gun, or pistol with its respective value: |
| D. | Do you have LIFE INSURANCE? Yes / No Term / Whole life (Whole Life means it has cash value) Value: \$ What company? |
| E. | Do you have an annuity? Yes / No If yes, describe: |
| F. | Do you have a RETIREMENT FUND with any employer, past or present? Yes / No If yes, itemize and how much: |
| | Do you have a LOAN against any retirement fund, and if yes, how much? |
| G. | Do you own any STOCKS OR BONDS other than retirement? Yes / No Value: \$ |
| H. | Do you have an interest in a partnership / joint venture? Yes / No If yes, itemize: |
| I. | Do you have government bonds or negotiable instruments? Yes / No If yes, itemize: |
| J. | Does anyone owe you any money or accounts receivable? Yes / No If yes, itemize: |
| | |
| K. | Are you entitled to past-due child support / alimony? Yes / No If yes, state how much you are due and from whom? |
| L. | Are you entitled to an equitable or future interest, life estate, interest in an insurance policy, trust or any other claim of every nature - patent, copyright, license, franchise, or other intangible? Yes / No If yes, describe: |
| M. | Do you have a claim for PERSONAL INJURY or WORKERS' COMP? Yes / No If yes, list the name, address, and phone number of the attorney who represents you and what you believe to be the value of your claim: |
| | |

| | Make | Model | Cylinders | Style | | | | |
|-----|---------------|--------------------------|---------------------------|----------|---------------|----------------|-------------------|----------------------|
| | | | | | # Doors | Mileage | Est. Value | Name on Title |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | our cars not list | |
| pri | or question | : Yes/ No If | yes, list what | and valu | ue (attach sh | eet if necess | sary): | |
| | | | | | | | | |
| | | | | | | | s? Yes / No If y | |
| anc | l list values | S: | | | | | | |
| | | | | | | | | |
| Do | you have i | inventory in | the business? | | | | | |
| Do | von oven e | unız onimola x | with a total wa | lua avar | - ¢200 002 V | og / No If go | dogoriho tuno | of onimal |
| | | | with a total va | | | | o, describe type | oi animai |
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| | | | | | | | es describe and | |
| you | ir estimate | of value? | | | | | | |
| | | | | | | | CTIONS, COIN | |
| CC | LLECTIO | NS ETC. Ye | es / No If yes, | please d | lescribe with | n your estima | ate of value | |
| | | | | | | | | |
| | | | | | | | | |
| На | s anyone le | eft you an IN | HERITANCE | E? Yes / | No If yes, w | ho and how | much? Please | provide particulars |
| | | | | | | | | |
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| | | pate anyone consult with | | ving you | ı an inherita | nce within the | he next 6 montl | ns? Yes / No. If ye |
| aes | cribe and c | consuit with | our office | | | | | |
| | | | | | | | | ools, art collection |
| | | | | | | ne etc.? Yes | / No If yes, ple | ease provide partic |
| WIL | n your esu | mate of valu | e (attach list i | i necess | <u> </u> | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | TAXES | | | |
| A. | | | o a tax refund ANSWER, | | cludes next | | are filing Bank | ruptcy after Septer |

If your tax refunds are over \$500.00 the trustee may claim the refund. Discuss this with the attorney.

If yes, how much? Federal \$______State \$______In which state were tax returns filed for last two years?______

| TAXES | Federal – Year 20 Amo State – Year 20_ Amo Homeowners - \$ OWING (Estimate if exa | ount \$ S | tate – Year 20 | Amount \$ | _ |
|----------------------------|---|----------------------------------|-----------------------|--------------------------------|------------------|
| ACCUR. Year | Returns Filed | Amount Owing IRS | Amount Owing State | Amount Owing Other State | Lien Filed? |
| 20 | Yes/No | | | | Yes/No |
| 20 | Yes/No | | | | Yes/No |
| 20 | Yes/No | | | | Yes/No |
| 20 | Yes/No | | | | Yes/No |
| 20 | Yes/No | | | | Yes/No |
| 20 | Yes/No | | | | Yes/No |
| 20 | Yes/No | | | | Yes/No |
| 20 | Yes/No | | | | Yes/No |
| A. A. If you win options p | Are you anticipating owing the state of the | sum you should case being filed. | xt calendar year? Y | Yes / No If yes, ho | te paralegal reg |
| V | was filed. Was a tax return filed by | | | our behalf? Yes / I | • |

SECURED LOANS (IMPORTANT - FILL OUT COMPLETELY REGARDLESS OF WHETHER YOU ARE KEEPING OR SURRENDERING PROPERTY) (i.e., car, furniture, jewelry, property taxes, home, etc.).

| Description & Date Acquired | Example: 2001 Ford | | |
|---|---|--|--|
| Name of Creditor and Address | US National Bank: Address: | | |
| Loan Number | #12345678 | | |
| Interest Rate | 9% | | |
| Value | \$15,000.00 | | |
| Current Balance | \$18,000.00 | | |
| Amount of Monthly Payments | \$450.00 | | |
| How many months behind? | 3 mos. | | |
| Do you want to keep items? | Yes | | |
| Is there a co- signer? If yes, name, address, and relationship | Joe Smith 1 Main Street Salem OR 97303 Uncle | | |

PLEASE REMEMBER WE CANNOT LIST ANY CREDITOR UNLESS WE HAVE FULL COMPLETE ADDRESSES WITH ZIP CODES

UNSECUREDCREDITORS

(Example: medical bills, charge cards, unsecured loans, utility bills, etc.)

PLEASE SPECIFY IF DEBT IS A BUSINESS DEBT. PLEASE, PRINT, AND FILL IN ADDRESSES FULLY AND CAREFULLY, LIST THE TOTAL AMOUNT DUE, NOT THE MONTHLY PAYMENT. INCLUDE ACCOUNT NUMBER!

| Name and Address of Creditor | Account Number | Type of Debt and Years Incurred (medical, credit card, collection, etc.) | Amount Owed | Co-Signer |
|------------------------------------|-------------------|--|----------------|-----------|
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| Name and Address of Creditor | Account Number | Type of Debt and Years Incurred (medical, credit card, collection, etc.) | Amount Owed | Co-Signer |
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| Name and Address of Creditor | Account Number | Type of Debt and Years Incurred (medical, credit card, collection, etc.) | Amount Owed | Co-Signer |
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| Name and Address of Creditor | Account Number | Type of Debt and Years Incurred (medical, credit card, collection, etc.) | Amount Owed | Co-Signer |
|------------------------------------|-------------------|--|----------------|-----------|
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STATEMENT OF AFFAIRS

1. Income from employment or operation of business

□ None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two **years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Attach pay stubs received in the past sixty (60) days.

Attach copies of your tax returns for the past two Years.

Indicate the amount and source of income for this year-to-date, last year, and two years ago.

2. Income other than from employment or operation of business

□ None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Did you sell anything, receive any benefits such as unemployment insurance, or have any gambling winnings?

Indicate the amount and source of income for this year-to-date, last year, and two years ago

3. Payments to creditors

Complete a. or b., as appropriate, and c.

□ None

Indicate the name and address of the creditor, dates of payment(s), amount paid, and amount still owing.

a. Individual or joint debtor(s) with primarily consumer debts:

List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

 $\quad \square \ None$

b. Debtor whose debts are not primarily consumer debts:

List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter

Indicate the name and address of the creditor, dates of payment(s) or transfers, amount paid, and amount still owing.

| None c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the recipient's name, address, and relationship, dates of payment(s), amount paid, and amount still owing. |
|---|---|
| 4. Suits and administrative proceedings, executions, garnishments and attachments a. List all suits and administrative proceedings to <i>which</i> the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the caption of the suit, case number, nature of proceeding, court and location, and the status or disposition. |
| b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the name and address of person for whose benefit the properly was seized, date of seizure and description and value of property. |
| 5. Repossessions, foreclosures and returns List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the name and address of the creditor or seller, date of repossession, foreclosure sale, transfer or return, and description and value of property. |
| 6. Assignments and receiverships a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.) | Indicate the name and address of the assignee, date of assignment, and terms of assignment or settlement. |
| b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the name and address of the custodian, name and location of court, case title and number, date of order, and description and value of property. |

| 7. Gifts List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the name and address of the recipient, relationship to debtor if any, date of gift, and description and value of gift. |
|---|--|
| 8. Losses List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the description and value of the property, description of circumstances and, whether the loss was covered in whole or in part by insurance, and the date of the loss. |
| 9. Payments related to debt counseling or bankruptcy List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case. | Indicate the name and address of the payee, date of payment, name of owner if other than debtor, and the amount of money or description and value of property. |
| 10. Other transfers a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the name and address of transferee, relationship to debtor, date, and description of property transferred and value received. |
| b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary. | Indicate the name of the trust or other device, date(s) of transfer(s), amount of money or description and value of property or debtor's interest in property. |

| 11. Closed financial accounts List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the name and address of the institution, type and number of account and amount of final balance, and the amount and date of sale or closing. |
|--|---|
| 12. Safe deposit boxes List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the name and address of bank or other depository, names and addresses of those with access to box or depository, description of contents, and date of transfer or surrender, if any. |
| 13. Setoffs List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) | Indicate the name and address of the creditor, date of setoff and amount of setoff |
| 14. Property held for another person List all property owned by another person that the debtor holds or controls. | Indicate the name and address of the owner, description and value of property, and the location of the property. |
| 15. Prior address of debtor If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse. | Indicate the address, name used, and dates of occupancy. |

| 16. Spouses and Former Spouses If the debtor resides 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 eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state. | Indicate the 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 similar term under an Environmental Law. | |
| a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law. | Indicate the site name and address, name and address of governmental unit, date of notice, and if known, the environmental law. |
| b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice. | Indicate the site name and address, name and address of governmental unit, date of notice, and if known, the environmental law. |
| □ None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number. | Indicate the name and address of governmental unit, docket number, and status or disposition. |

| Fill in this information to identify | your case: | | | | |
|--|---|---|-----------------------|--------------------------------------|--|
| B.1. 4 | | | | | |
| Debtor 1 First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | District of | | | |
| Case number | | | | Check if t | his is: |
| (If known) | | | | ☐ An am | nended filing |
| | | | | | plement showing post-petition er 13 income as of the following date: |
| Official Form B 6I | | | | MM / DI | D/YYYY |
| Schedule I: You | ır Income | | | | 12/13 |
| supplying correct information. If yo | ou are married and not filingse is not filingse is not filing with you, do top of any additional page | ig jointly, and you o not include info | ır spouse ormation | e is living with y about your spo | or 2), both are equally responsible for you, include information about your spouse use. If more space is needed, attach a known). Answer every question. |
| Fill in your employment | | . | | | |
| information. | | Debtor 1 | | | Debtor 2 or non-filing spouse |
| If you have more than one job, attach a separate page with information about additional employers. | Employment status | ☐ Employed ☐ Not employe | ed | | ☐ Employed ☐ Not employed |
| Include part-time, seasonal, or self-employed work. | | | | | |
| Occupation may Include student or homemaker, if it applies. | Occupation | | | | |
| | Employer's name | | | | |
| | Employer's address | Number Street | | | Number Street |
| | | | | | |
| | | City | State | ZIP Code | City State ZIP Code |
| | How long employed there | • | State . | ZIF Code | City State ZIP Code |
| Part 2: Give Details About | Monthly Income | | | | |
| spouse unless you are separated | • | - | | | rite \$0 in the space. Include your non-filing |
| If you or your non-filing spouse had below. If you need more space, at | | | mation to | or all employers f | or that person on the lines |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| List monthly gross wages, sala deductions). If not paid monthly, | | | 2. \$ | | \$ |
| 3. Estimate and list monthly over | time pay. | | 3. +\$ | | + \$ |
| 4. Calculate gross income. Add lin | ne 2 + line 3. | | 4. \$ | <u> </u> | \$ |

| First Name | Middle Name | Last Name | |
|------------|-------------|-----------|--|

| | | | For Debtor 1 | | For Debtor 2 or non-filing spouse | |
|-----------------|--|--------|--------------------|------|-----------------------------------|-------------------------|
| Co | py line 4 here | 4. | \$ | | \$ | - |
| 5. Lis t | all payroll deductions: | | | | | |
| 5a | . Tax, Medicare, and Social Security deductions | 5a. | \$ | | \$ | |
| | . Mandatory contributions for retirement plans | 5b. | \$ | _ | \$ | |
| | Voluntary contributions for retirement plans | 5c. | \$ | | \$ | |
| | Required repayments of retirement fund loans | 5d. | \$ | _ | \$ | |
| 5e | . Insurance | 5e. | \$ | _ | \$ | _ |
| 5f | Domestic support obligations | 5f. | \$ | _ | \$ | - |
| 50 | . Union dues | 5g. | \$ | _ | \$ | |
| | . Other deductions. Specify: | 5h. | +\$ | _ | + \$ | |
| 6. A | dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$ | _ | \$ | |
| 7. C a | alculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | _ | \$ | - |
| 8. Lis | st all other income regularly received: | | | | | |
| 88 | Net income from rental property and from operating a business, profession, or farm | | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | |
| | monthly net income. | 8a. | \$ | _ | \$ | - |
| 81 | o. Interest and dividends | 8b. | \$ | _ | \$ | - |
| 80 | Family support payments that you, a non-filing spouse, or a depender regularly receive | nt | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | _ | \$ | - |
| 80 | l. Unemployment compensation | 8d. | \$ | _ | \$ | - |
| 86 | e. Social Security | 8e. | \$ | _ | \$ | |
| 8f | Other government assistance that you regularly receive | | | | | |
| | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | ce | \$ | _ | \$ | |
| | Specify: | 8f. | | | | |
| 89 | g. Pension or retirement income | 8g. | \$ | | \$ | |
| 81 | n. Other monthly income. Specify: | 8h. | +\$ | _ | +\$ | • |
| | | | - φ | 7 | |] |
| 9. A | dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ | Ⅎ | \$ | ·J |
| | culate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ | + | \$ | = \$ |
| 11. St a | ate all other regular contributions to the expenses that you list in Sched | lule J | I. | | | |
| Inc | clude contributions from an unmarried partner, members of your household, your friends or relatives. | | | omr | mates, and | |
| Do | not include any amounts already included in lines 2-10 or amounts that are r | not av | ailable to pay exp | ense | | |
| Sp | ecify: | | | | _ 11 | 1. + \$ |
| | d the amount in the last column of line 10 to the amount in line 11. The lite that amount on the Summary of Schedules and Statistical Summary of Ce | | | | • | <u>\$</u> |
| _ | | | | | | Combined monthly income |
| 13. D o | you expect an increase or decrease within the year after you file this for | orm? | • | | | |

| | Fill in this information to identify | your case: | | | | |
|----------|--|--|---------------------------------|----------|---------------------------------|---------------------|
| | Debtor 1 | Middle Name Last Name | Check if thi | s is: | | |
| | Debtor 2 | | ——— An ame | | ina | |
| | (Spouse, if filing) First Name | Middle Name Last Name | | | • | petition chapter 13 |
| ' | United States Bankruptcy Court for the: | District of _ | expense | es as of | the following | date: |
| | Case number(If known) | | MM / DD | | _ | |
| L | | | | | g for Debtor 2 parate househ | because Debtor 2 |
| <u>C</u> | Official Form B 6J | | | , | | |
| S | Schedule J: Yo | ur Expenses | | | | 12/13 |
| in | | ossible. If two married people are fili ed, attach another sheet to this form | | - | | |
| Р | Describe Your Hou | sehold | | | | |
| 1. | Is this a joint case? | | | | | |
| | ☐ No. Go to line 2.☐ Yes. Does Debtor 2 live in a s | separate household? | | | | |
| | □ No | • | | | | |
| | ☐ Yes. Debtor 2 must file | e a separate Schedule J. | | | | |
| 2. | Do you have dependents? | ☐ No | Dependent's relationship to | | Dependent's | Does dependent live |
| | Do not list Debtor 1 and Debtor 2. | Yes. Fill out this information for each dependent | Debtor 1 or Debtor 2 | | age | with you? |
| | Do not state the dependents' names. | | | | | ☐ No ☐ Yes |
| | | | | | | ☐ No |
| | | | | | | Yes |
| | | | | | | ☐ No ☐ Yes |
| | | | | | | □ No |
| | | | | | | Yes |
| | | | | _ | | ☐ No |
| | | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? | ☐ No ☐ Yes | | | | |
| D۵ | ert 2: Estimato Vour Ongoi | ng Monthly Expenses | | | | |
| | _ | bankruptcy filing date unless you a | ro using this form as a supplor | nont in | a Chantor 13 c | aso to roport |
| ex | | skruptcy is filed. If this is a supplement | _ | | - | - |
| ln | clude expenses paid for with nor | n-cash government assistance if you | ı know the value | | | |
| | | ded it on Schedule I: Your Income (C | - | | Your exper | nses |
| 4. | The rental or home ownership any rent for the ground or lot. | expenses for your residence. Include | first mortgage payments and | 4. | \$ | |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. | | |
| | 4b. Property, homeowner's, or r | | | 4b. | | |
| | 4c. Home maintenance, repair, | | | 4c. | \$ | |
| | 4d. Homeowner's association or | r condominium dues | | 4d. | \$ | |

| Debtor 1 | | | | Case number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | First Name | Middle Name | Last Name | |

| | | | Your expenses |
|-----|--|--------------|---------------|
| 5 | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ |
| | | J. | |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$ |
| | 6b. Water, sewer, garbage collection | 6b. | \$ |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ |
| | 6d. Other. Specify: | 6d. | \$ |
| 7. | Food and housekeeping supplies | 7. | \$ |
| 8. | Childcare and children's education costs | 8. | \$ |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ |
| 10. | Personal care products and services | 10. | \$ |
| 11. | Medical and dental expenses | 11. | \$ |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | | \$ |
| | Do not include car payments. | 12. | - |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ |
| 14. | Charitable contributions and religious donations | 14. | \$ |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$ |
| | 15b. Health insurance | 15b. | \$ |
| | 15c. Vehicle insurance | 15c. | \$ |
| | 15d. Other insurance. Specify: | 15d. | \$ |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ |
| 17. | Installment or lease payments: | | |
| - | 17a. Car payments for Vehicle 1 | 17a. | \$ |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ |
| | 17c. Other. Specify: | 17b. | \$ |
| | 17d. Other. Specify: | 17c. 17d. | \$ |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I). | 18. | \$ |
| | | | |
| 19. | Other payments you make to support others who do not live with you. | 19. | \$ |
| | Specify: | 13. | Ψ |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income | me. | |
| | 20a. Mortgages on other property | 20a. | \$ |
| | 20b. Real estate taxes | 20b. | \$ |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ |

| Debtor 1 | First Name Middle Name Last Name | se number (if known) | |
|-------------|---|----------------------|-------------|
| . Other. S | pecify: | 21. | +\$ |
| . Your mo | nthly expenses. Add lines 4 through 21. | | \$ |
| The result | t is your monthly expenses. | 22. | \$ |
| . Calculate | your monthly net income. | | |
| 23a. Cop | y line 12 (your combined monthly income) from Schedule I. | 23a. | \$ |
| 23b. Cop | y your monthly expenses from line 22 above. | 23b. | - \$ |
| 23c. Sub | tract your monthly expenses from your monthly income. | | Φ. |
| The | result is your monthly net income. | 23c. | \$ |
| For examp | spect an increase or decrease in your expenses within the year after you file to ble, do you expect to finish paying for your car loan within the year or do you expect payment to increase or decrease because of a modification to the terms of your mo | t your | |
| ☐ No. | | | |
| ☐ Yes. | Explain here: | | |
| | | | |
| | | | |
| | | | |

Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

B21 (Official Form 21) (12/12)

UNITED STATES BANKRUPTCY COURT

| District | of |
|--|--|
| In re, [Set forth here all names including married, maiden, and trade names used by debtor within last 8 years] |))) |
| Debtor Address |) Case No) Chapter |
| Last four digits of Social-Security or Individual Taxpayer-Identification (ITIN) No(s).,(if any): |))) |
| Employer Tax-Identification (EIN) No(s).(if any): |) |
| STATEMENT OF SOCIAL-S (or other Individual Taxpayer-Identi | ` ' |
| 1.Name of Debtor (Last, First, Middle):(Check the appropriate box and, if applicable, provide the require | d information.) |
| □ Debtor has a Social-Security Number and it is: | s an Individual Taxpayer-Identification |
| 2.Name of Joint Debtor (Last, First, Middle):(Check the appropriate box and, if applicable, provide the require | |
| ☐ Joint Debtor has a Social-Security Number and it is: | out has an Individual Taxpayer-Identification Number |
| I declare under penalty of perjury that the foregoing is true and co | rrect. |
| XSignature of Debtor | Date |
| XSignature of Joint Debtor | Date |

^{*}Joint debtors must provide information for both spouses.