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BANKRUPTCY CLIENT QUESTIONNAIRE & REQUIRED DOCUMENTATION

IMPORTANT NOTE TO DEBTORS: The attached questionnaire must be completed FULLY & ACCURATELY! The questionnaire is confidential and between you and your attorney only; thus, don't fret when completing it. If there is something you don't understand just mark it and discuss with your attorney. The questionnaire is a PDF fillable form so you may type in your answers and save to your computer. Please remember to save occasionally to not lose any information. You may also print and handwrite your answers. When you are finished, you may email the completed questionnaire to bacchuslaw@gmail.com (put your full name in the subject line). You may also drop it off at one of our three offices and you may also fax it as well!

MANDATORY DOCUMENTS NEEDED: When returning the completed questionnaire, you must also provide/complete ALL of the applicable information below;

А.	CREDIT COUNSELING CERTIFICATION <u>Check box below if included;</u>
	Complete the Pre-Petition Filing Credit Counseling Course,
	You can use whichever company you want; however, I recommend using
	When asked, you will be filing your bankruptcy in the Eastern District of Louisiana
	(After we have filed your case and received a case number from the Court, you will then be able to
	log on and complete the post-filing debtor education coursebut for now, just perform the Pre-filing credit counseling course.)
B.	INCOME
	Last two (2) years Federal & State Tax Returns OR transcripts from IRS
	Last (7) months Payroll Stubs for each employed person in the household
	provide a Profit and Loss Statement for the last SIX months broken down by month)
	In other words, show me your gross receipts and expenses for each of last six months
	If applicable, copy of Social Security/Disability/Unemployment Letter
C.	FINANCIAL
	Copies of <u>ALL</u> bank statements for the last three (3) months
	☐Your last statement for any IRA, 401K or Health Savings Account□
D.	DIVORCE/SUPPORT/LAWSUIT ISSUES
	If you are paying Child or Spousal Support, please provide a copy
	of the Order of Support or letter from state support agency showing the amount
	If you have been or are currently being sued or if you are suing someone else,
	Provide a copy of the lawsuit and/or Judgment(s) filed or served upon you
Е.	MISCELLANEOUS (specifically asked of you by your attorney)
	Copies of Registration for ALL vehicles owned or leased
	If being garnished, contact name and fax number to HR dept
	

email to: bacchuslaw@gmail.com



a limited liability company

Bankruptcy Client Questionnaire

ALL information provided is CONFIDENTIAL and used for the sole purpose of allowing our attorneys to properly assist you and your family, so please be thorough and write legibly or type! PLEASE REMEMBER TO SAVE TO YOUR COMPUTER FILES AND SAVE OCCASSIONALLY AS YOU GO SO YOU DON'T LOSE ANY COMPLETED DATA!

DATE:			
HAVE YOU FILED BANKRUPTCY BEFORE? No Yes. If so, please provide whether chapter 7 or 13, the date(s) you filed, where you filed and the outcome of each case (discharged or dismissed)			
I HAVE THE FOLLOWING ISSUES (PLEASE CHECK ALL THAT APPLY): FORECLOSURE (PROVIDE SALE DATE IF KNOWN) REPOSSESSION LAWSUIT(S) GARNISHMENT CREDIT CARDS MEDICAL DEBT PAYDAY LOANS MORTGAGE ARREARS BANK LOANS FINANCE COMPANY LOANS TAXES DIVORCE STUDENT LOANS			
HOW DID YOU HEAR ABOUT BACCHUS LAW GROUP? (PLEASE CHECK ALL THAT APPLY, THANK YOU): GOOGLE OUR WEBSITE PHONE BOOK TV ADVERTISEMENT FACEBOOK OTHER: REFERRAL; IF REFERRED, PLEASE SHARE WITH US WHO REFERRED YOU			

SECTION (1) PERSONAL INFORMATION:

FULL NAME:	First	MIDDLE	LAST	OTHER NA	AMES USED
DATE OF BIRTH:		SOCIAL SEC	CURITY NUMBER:		
	NGLE MARRIED	SEPARATED	DIVORCED WIDOW		
*IF MARRIED OR SEPARAT	ED, PLEASE PROVIDE S	POUSE'S FULL NAM	E EVEN IF THEY WILL NOT BE	E FILING BANKRUPTCY	WITH YOU;
SPOUSE NAME:	First	Middle	Last	OTHER NA	AMES USED
DATE OF BIRTH:		SOCIAL SEC	URITY NUMBER:		
PHYSICAL ADDRESS:					
		FREET ADDRES	DRESS, PLEASE PROVIDE:	CITY	Zip
		MUN	NICIPAL/PO BOX	City	Zip
HAVE YOU LIVED AT THIS ADDRESS FOR THE LAST 3 YEARS? YES NO IF NO, PLEASE PROVIDE YOUR PREVIOUS ADDRESSES FOR LAST THREE YEARS WITH THE APPROXIMATE DATES OF EACH.					
PHONE NUMBER(S):	()	-	; &/OR () -	

EMAIL ADDRESS*** (REQUIRED):

DO YOU HAVE ANY **DEPENDENTS/MINOR CHILDREN** THAT LIVE WITH YOU? IF YES, PLEASE LIST THEIR AGES AND RELATIONSHIP TO YOU:

DO YOU PAY CHILD SUPPORT OR ALIMONY TO ANYONE?	YES	No	IS IT COURT ORDERED?	YES	No
ARE YOU CURRENT WITH THE SUPPORT/ALIMONY?	YES	No			
IF NO, HOW MUCH ARE YOU BEHIND? $\$$					

SECTION (2) TAXES

HAVE YOU FILED ALL REQUIRED TAX RETURNS FOR THE LAST 4 YEARS? YES NO I AM NOT REQUIRED TO FILE IN ORDER TO FILE BANKRUPTCY YOU MUST HAVE FILED ALL RETURNS FOR THE LAST 4 YEARS, UNLESS YOU WERE NOT REQUIRED TO FILE. *IF YOU HAVE PUT OFF FILING DUE TO THE FEAR OF OWING TAXES, UNDERSTAND THAT A CHAPTER 13 CAN HELP YOU PAY THOSE OVER TIME AND/OR EVEN DISCHARGE SOME OF THAT TAX LIABILITY, SO BE FORTHCOMING WITH YOUR ATTORNEY SO YOU CAN GET THE MOST BENEFIT FROM THE BANKRUPTCY LAWS.

Do you o	OWE ANY BACK TAXES TO TH	NO IF YES, PLEASE COMPLETE THE FOLLOWING;	
IRS,	I OWE \$	FOR TAX YEARS	
STATE,	I OWE \$	FOR TAX YEARS	

ARE YOU CURRENTLY STILL AWAITING TO RECEIVE A REFUND FOR "PREVIOUSLY" FILED TAX RETURNS?

SECTION (3) PERSONAL ASSETS

Have you sold/transferred any assets in the last two years?	No	Yes
Do you own any patents/copyrights or franchise rights?	No	Yes
Are you currently a plaintiff in a lawsuit?	No	Yes
Do you have any "potential" claims/suits against someone?	No	Yes
Does anyone/ business currently owe you money formally?	No	Yes
Do you have any truly expensive art/collectibles?	No	Yes
Do you own any wedding rings valued over \$5,000?	No	Yes
Do you have any retirement accounts (IRA, 401, Pension)?	No	Yes
Does anyone hold security deposits from you (rent/water)?	No	Yes

Please list all checking/savings accounts and state how much money is typically kept in the account after monthly bills clear the account;

Do you own liquid assets, such as **Stocks, Bonds, Mutual Funds, Annuities or "whole" life cash values**? No Yes,if so please list/describe each account and provide its current cash value:

Please check all that you own below and provide an estimated value of the property. A guess on value is perfectly fine! Most of this property is exempt from seizure anyway, but the court still likes an itemization.

Household Furnishings/Décor/appliances/utensils/tableware		
TV's/DVD/Stereo/Computers		
Lawn Equipment	\$	
Clothing	\$	
Guns (Describe)	\$	
Jewelry (describe)	\$	
Hobby Gear/Equipment	\$	
Livestock/Farm Animals		

"*Other than large items like Cars, Boats, Motorcycles, Trailers, RV's*", is there any other personal property you feel the need to disclose that hasn't already been listed? No | Yes. IF SO, PLEASE DESCRIBE AND GIVE AN ESTIMATED VALUE:

SECTION (4) SUCCESSION INTERESTS

ARE BOTH OF YOUR PARENTS STILL ALIVE? YES NO ARE BOTH OF YOUR SPOUSE'S PARENTS STILL ALIVE? YES NO

IF ANY PARENT IS DECEASED, DID THEY OWN PROPERTY AT THE TIME OF THEIR DEATH? No Yes IF YES, PLEASE DESCRIBE WHAT HAPPENED TO THAT PROPERTY;

SECTION (5) REAL ESTATE OWNED

DO YOU CURRENTLY OWN, HAVE AN INTEREST IN, OR PAY A MORTGAGE ON ANY REAL ESTATE, MOBILE HOMES, LOTS, ACREAGE OR TIMESHARES?

NO, I RENT OR LIVE WITH FAMILY/FRIENDS AND OWN NO PROPERTY (*YOU MAY PROCEED TO SECTION 6*) YES, I OWN/HAVE AN INTEREST IN THE FOLLOWING PROPERTY/PROPERTIES DESCRIBED BELOW;

PROPERTY NUMBER 1.			
***EVEN IF YOUR REAL ESTATE IS PAID FOR, PLEASE STILL FILL OUT ALL APPLICABLE INFORMATION BELOW.			
PROPERTY ADDRESS:			
THIS IS A: SINGLE FAMILY HOME DUPLEX MOBILE HOME/TRAILER COMMERCIAL LAND/ACRES TIMESHARE			
WHO OWNS (IS ON TITLE) TO THIS PROPERTY? <u>Me alone Me & my spouse</u> Spouse alone <u>Me & another person</u> WHAT YEAR DID YOU BUY THIS PROPERTY? HOW MUCH DID YOU PAY FOR IT?			
WHAT IS THE MARKET VALUE OF THIS PROPERTY IF YOU WERE TO TRY AND SELL IT? \$			
FIRST MORTGAGE COMPANY NAME & ADDRESS:			
ACCOUNT NUMBER: MONTHLY PAYMENT \$			
ARE TAXES/INSURANCE INCLUDED? YES NO			
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN? Yes No			
OTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO YES			
IF YES, PLEASE PROVIDE THEIR NAME, ADDRESS AND RELATIONSHIP TO YOU			
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$			
**DO YOU WANT TO KEEP THIS PROPERTY OR ARE YOU LOOKING TO SURRENDER IT BACK TO AVOID PAYING FOR IT? KEEP SURRENDER			
*If you have a second mortgage on this particular property, please continue on below. If not, you may continue to list other properties owned on the next page or go to the next section if you have no other real estate interests.			
SECOND MORTGAGE COMPANY NAME & ADDRESS:			
ACCOUNT NUMBER: MONTHLY PAYMENT \$			
ARE TAXES/INSURANCE INCLUDED? YES NO			
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN? Yes No			
OTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO YES			
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$			
*If you have a third mortgage on this particular property, please continue on below. If not, you may continue to list other properties owned on the next page or, if you have no other real estate, you may proceed to the next section.			
Third Mortgage Company Name & Address:			
ACCOUNT NUMBER: MONTHLY PAYMENT \$			
ARE TAXES/INSURANCE INCLUDED? YES NO			
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN? Yes No			
OTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO YES			
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$			

.....REAL ESTATE SECTION CONTINUED

If you have second piece of real estate/property, please continue below. If you are done entering real estate you may scroll to section 6

PROPERTY NUMBER 2.			
***Even if your real estate is paid for, please still fill out ALL applicable information below.			
PROPERTY ADDRESS: This is a: Single Family Home Duplex Mobile Home/Trailer Commercial Land/Acres Timeshare			
WHO OWNS (IS ON TITLE) TO THIS PROPERTY? Me alone Me & my spouse Spouse alone Me & another person WHAT YEAR DID YOU BUY THIS PROPERTY? HOW MUCH DID YOU PAY FOR IT?			
WHAT IEAR DID TOU BUT THIS PROPERTY? IN THOW MUCH DID TOU PATFOR IT? WHAT IS THE MARKET VALUE OF THIS PROPERTY IF YOU WERE TO TRY AND SELL IT? \$			
FIRST MORTGAGE COMPANY NAME & ADDRESS:			
ACCOUNT NUMBER: MONTHLY PAYMENT \$			
ARE TAXES/INSURANCE INCLUDED? YES NO			
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN? Yes No			
OTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO YES			
IF YES, PLEASE PROVIDE THEIR NAME, ADDRESS AND RELATIONSHIP TO YOU			
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$			
**DO YOU WANT TO KEEP THIS PROPERTY OR ARE YOU LOOKING TO SURRENDER IT BACK TO AVOID PAYING FOR IT? KEEP SURRENDER			
*If you have a second mortgage on this particular property, please continue on below. If not, you may continue to list other properties owned on the next page or go to the next section if you have no other real estate interests.			
SECOND MORTGAGE COMPANY NAME & ADDRESS:			
ACCOUNT NUMBER: MONTHLY PAYMENT \$			
ARE TAXES/INSURANCE INCLUDED? YES NO			
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN? Yes No			
OTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO YES			
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$			
*If you have a third mortgage on this particular property, please continue on below. If not, you may continue to list other properties owned on the next page or, if you have no other real estate, you may proceed to the next section.			
Third Mortgage Company Name & Address:			
ACCOUNT NUMBER: MONTHLY PAYMENT \$			
ARE TAXES/INSURANCE INCLUDED? YES NO			
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN?YesNoOTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU?NOYes			
OTHER THAN TOUR SPOUSE, DID ANTONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO TES			
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$			

.....REAL ESTATE SECTION CONTINUED

If you have third piece of real estate/property, please continue below. If you are done entering real estate you may scroll to section 6

PROPERTY NUMBER 3.				
***Even if your real estate is paid for, please still fill out ALL applicable information below.				
PROPERTY ADDRESS:				
THIS IS A: SINGLE FAMILY HOME DUPLEX MOBILE HOME/TRAILER COMMERCIAL LAND/ACRES TIMESHARE				
WHO OWNS (IS ON TITLE) TO THIS PROPERTY? ME ALONE ME & MY SPOUSE SPOUSE ALONE ME & ANOTHER PERSON				
WHAT YEAR DID YOU BUY THIS PROPERTY? HOW MUCH DID YOU PAY FOR IT?				
What is the market value of this property if you were to try and sell it? $\$$				
First Mortgage Company Name & Address:				
ACCOUNT NUMBER: MONTHLY PAYMENT \$				
ARE TAXES/INSURANCE INCLUDED? YES NO				
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN? Yes No				
OTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO YES				
IF YES, PLEASE PROVIDE THEIR NAME, ADDRESS AND RELATIONSHIP TO YOU				
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$				
**DO YOU WANT TO KEEP THIS PROPERTY OR ARE YOU LOOKING TO SURRENDER IT BACK TO AVOID PAYING FOR IT? KEEP SURRENDER				
*If you have a second mortgage on this particular property, please continue on below. If not, you may continue to list other properties owned on the next page or go to the next section if you have no other real estate interests.				
SECOND MORTGAGE COMPANY NAME & ADDRESS:				
ACCOUNT NUMBER: MONTHLY PAYMENT \$				
ARE TAXES/INSURANCE INCLUDED? YES NO				
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN? Yes No				
OTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO YES				
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$				
*If you have a third mortgage on this particular property, please continue on below. If not, you may continue to list other properties owned on the next page or, if you have no other real estate, you may proceed to the next section.				
Third _{Mortgage} Company Name & Address:				
ACCOUNT NUMBER: MONTHLY PAYMENT \$				
ARE TAXES/INSURANCE INCLUDED? YES NO				
DO YOU HAVE MORE THAN 5 YEARS REMAINING ON THIS LOAN? Yes No				
OTHER THAN YOUR SPOUSE, DID ANYONE ELSE CO-SIGN ON THIS LOAN WITH YOU? NO YES				
ARE YOU CURRENT ON THIS LOAN? No Yes IF NO, HOW MUCH ARE YOU BEHIND? \$				

^{****}This completes the REAL ESTATE SECTION, if you have more than 3 pieces of real estate/property, please attach an additional page(s) as needed providing all the above information on each property. And just submit it to us an attachment.

SECTION (6) CARS & MOTORCYCLES

****YOU MUST LIST ALL CARS REGISTERED IN YOUR NAME EVEN IF IT IS PAID OFF OR USED BY SOMEONE ELSE. THERE IS SPACE BELOW FOR 4 CARS/MOTORCYCLES. IF YOU HAVE MORE THAN 4, PLEASE SUBMIT AN ATTACHMENT WITH ALL THE REQUIRED INFORMATION.

CAR/ MOTORCYLE No. 1.				
MAKE	MODEL	SUBMODEL (EX, LS)		
YEAR	MILEAGE	CONDITION:		
	TLE LOAN ON THIS VEHICLE? OMPANY NAME & ADDRESS:	NO, YES, I OWE THE FOLLOWING ON THIS CAR;		
LOAN NUMBER:		MONTHLY PAYMENT: \$		
PAYOFF AMOUNT: \$				
	DXIMATE DATE THAT YOU TOO	K THIS LOAN OUT?		
# OF MONTHS REMA				
		IF NO, HOW MUCH ARE YOU BEHIND? \$		
		O-SIGN ON THIS LOAN WITH YOU? YES NO IF SO,		
PLEASE PROVIDE TH	EIR FULL NAME, RELATIONSHI	P TO YOU AND THEIR ADDRESS:		
**Do you want to ki	FFP THIS VFHICLE OR ARE YOU LOO	KING TO SURRENDER IT BACK TO AVOID PAYING FOR IT?		
	RENDER	KING TO SURLENDER IT BACK TO AVOID FAIling FOR IT:		
CAR/MOTORCY	LE NO. 2			
MAKE	MODEL	SUBMODEL (EX, LS)		
YEAR	MILEAGE	CONDITION:		
IS THERE A LOAN/TI	TLE LOAN ON THIS VEHICLE?	NO, YES, I OWE THE FOLLOWING ON THIS CAR;		
FINANCE CO	OMPANY NAME & ADDRESS:			
LOAN NUMBER:		Monthly Payment: \$		
PAYOFF AMOUNT: \$	1	MONTHLI FAIMENI. ϕ		
WHAT IS THE APPROXIMATE DATE THAT YOU TOOK THIS LOAN OUT?				
# OF MONTHS REMAINING:				
ARE YOU CURRENT ON THIS LOAN? YES NO IF NO, HOW MUCH ARE YOU BEHIND? \$				
DID ANYONE ELSE, OTHER THAN YOUR SPOUSE, CO-SIGN ON THIS LOAN WITH YOU? YES NO IF SO,				
PLEASE PROVIDE THEIR FULL NAME, RELATIONSHIP TO YOU AND THEIR ADDRESS:				
	,			
**Do you want to keep this Vehicle or are you looking to surrender it back to avoid paying for it?				
KEEP / SURF	RENDER			

..CAR/MOTORCYCLE SECTION CONTINUED..IF YOU HAVE NO OTHER CARS OR MOTORCYCLES, YOU MAY PROCEED TO SECTION 7.

CAR/MOTORCYI	JE NO. 3 .	
MAKE	MODEL	SUBMODEL (EX, LS)
YEAR	MILEAGE	CONDITION:
	LE LOAN ON THIS VEHICLE?	NO, YES, I OWE THE FOLLOWING ON THIS CAR;
FINANCE CO	MPANY NAME & ADDRESS:	
LOAN NUMBER:		MONTHLY PAYMENT: \$
PAYOFF AMOUNT: \$		
	KIMATE DATE THAT YOU TOO	K THIS LOAN OUT?
# OF MONTHS REMAI		IF NO, HOW MUCH ARE YOU BEHIND? \$
		O-SIGN ON THIS LOAN WITH YOU? YES NO IF SO,
	· · · · · · · · · · · · · · · · · · ·	P TO YOU AND THEIR ADDRESS:
	,	
		KING TO SURRENDER IT BACK TO AVOID PAYING FOR IT?
KEEP SURRI	ENDER	
CAR/MOTORCYI		
CAR/ MOTORCYL	2E NO. 4	
MAKE	MODEL	SUBMODEL (EX, LS)
YEAR	MILEAGE	CONDITION:
	LE LOAN ON THIS VEHICLE?	NO, YES, I OWE THE FOLLOWING ON THIS CAR;
FINANCE CO	MPANY NAME & ADDRESS:	
LOAN NUMBER:		MONTHLY PAYMENT: \$
PAYOFF AMOUNT: \$		
	XIMATE DATE THAT YOU TOO	K THIS LOAN OUT?
# OF MONTHS REMAI		IENO HOWARDON ADD YOU DEUDDO
	· · · · · · · · · · · · · · · · · · ·	IF NO, HOW MUCH ARE YOU BEHIND? \$ O-SIGN ON THIS LOAN WITH YOU? YES NO IF SO,
		O-SIGN ON THIS LOAN WITH YOU? <u>YES NO</u> IF SO, IP TO YOU AND THEIR ADDRESS:
	ARTOLL IVANIE, RELATIONSHI	i to too and fillik address.
**Do you want to kee	EP THIS VEHICLE OR ARE YOU LOO	KING TO SURRENDER IT BACK TO AVOID PAYING FOR IT?
	ENDER	

SECTION (7) TOYS: BOATS, ATV's, TRAILERS, RV's, etc

****USE THIS SPACE FOR ADDITIONAL VEHICLES **AND ALL OTHER SECURED TOYS/DEBTS** SUCH AS ATV'S, BOATS, TRAILERS, FINANCE COMPANY LOANS WITH COLLATERAL IN HOUSEHOLD GOODS, ETC. IF YOU HAVE NONE, YOU MAY PROCEED TO SECTION (8).

TOY NO. 1 .		
MAKE	MODEL	SUBMODEL (EX, LS)
YEAR	MILEAGE	CONDITION:
	TLE LOAN ON THIS VEHICLE? OMPANY NAME & ADDRESS:	NO, YES, I OWE THE FOLLOWING ON THIS CAR;
LOAN NUMBER:		Monthly Payment: \$
PAYOFF AMOUNT: \$		
WHAT IS THE APPRO	DXIMATE DATE THAT YOU TOO	K THIS LOAN OUT?
# OF MONTHS REMA	AINING:	
ARE YOU CURRENT	ON THIS LOAN? YES NO	IF NO, HOW MUCH ARE YOU BEHIND? \$
DID ANYONE ELSE,	OTHER THAN YOUR SPOUSE, CO	D-SIGN ON THIS LOAN WITH YOU? YES NO IF SO,
PLEASE PROVIDE TH	IEIR FULL NAME, RELATIONSHI	P TO YOU AND THEIR ADDRESS:
	eep this Vehicle or are you lood render	KING TO SURRENDER IT BACK TO AVOID PAYING FOR IT?
TOY NO. 2 .	MODEL	CURRED FL (FV 1.9)
MAKE YEAR	MODEL MILEAGE	SUBMODEL (EX, LS) CONDITION:
ILAK	MILEAGE	CONDITION.
	TLE LOAN ON THIS VEHICLE? OMPANY NAME & ADDRESS:	NO, YES, I OWE THE FOLLOWING ON THIS CAR;
LOAN NUMBER:		Monthly Payment: \$
PAYOFF AMOUNT: \$		
WHAT IS THE APPRO	DXIMATE DATE THAT YOU TOO	K THIS LOAN OUT?
# OF MONTHS REMA		
ARE YOU CURRENT	ON THIS LOAN? YES NO	IF NO, HOW MUCH ARE YOU BEHIND? \$
		D-SIGN ON THIS LOAN WITH YOU? YES NO IF SO,
PLEASE PROVIDE TH	IEIR FULL NAME, RELATIONSHI	P TO YOU AND THEIR ADDRESS:
	eep this Vehicle or are you loop Render	KING TO SURRENDER IT BACK TO AVOID PAYING FOR IT?

...CONTINUATION PAGE FOR ADDITIONAL VEHICLES AND/OR TOYS...IF YOU ARE DONE AND HAVE NO ADDITIONAL TOYS/CARS, YOU MAY PROCEED TO SECTION 8 ON THE NEXT PAGE

TOY NO. 3		
MAKE	MODEL	SUBMODEL (EX, LS)
YEAR	MILEAGE	CONDITION:
T		X. X.
	TLE LOAN ON THIS VEHICLE?	NO, YES, I OWE THE FOLLOWING ON THIS CAR;
FINANCE CO	OMPANY NAME & ADDRESS:	
LOAN NUMBER:		Monthly Payment: \$
PAYOFF AMOUNT: \$		MONTHLY FAYMENT. \$
	XIMATE DATE THAT YOU TOOK	
# OF MONTHS REMA		THIS LOAN OUT?
ARE YOU CURRENT		IF NO, HOW MUCH ARE YOU BEHIND? \$
		· · · · · · · · · · · · · · · · · · ·
		D-SIGN ON THIS LOAN WITH YOU? YES NO IF SO,
PLEASE PROVIDE TH	EIR FULL NAME, RELATIONSHIP	P TO YOU AND THEIR ADDRESS:
**D		
		KING TO SURRENDER IT BACK TO AVOID PAYING FOR IT?
KEEP SURR	RENDER	
TOY NUMBER 4.		
	MODEL	
MAKE	MODEL	SUBMODEL (EX, LS)
YEAR	MILEAGE	CONDITION:
	TLE LOAN ON THIS VEHICLE?	NO, YES, I OWE THE FOLLOWING ON THIS CAR;
FINANCE CO	OMPANY NAME & ADDRESS:	
LOAN NUMBER:		Monthly Payment: \$
PAYOFF AMOUNT: \$		
	XIMATE DATE THAT YOU TOOK	ς τημς ι φανιούτ?
# OF MONTHS REMA		THIS LOAN OUT:
ARE YOU CURRENT		IF NO, HOW MUCH ARE YOU BEHIND? \$
	·	D-SIGN ON THIS LOAN WITH YOU? YES NO IF SO,
PLEASE PROVIDE TH	EIK FULL NAME, KELAHUNSHIF	P TO YOU AND THEIR ADDRESS:
**DO VOU WANT TO VI	τερ τηις Vehici ε ωρ λρε νωμ τωων	ING TO SURRENDER IT BACK TO AVOID PAYING FOR IT?
		LING I U SUKKENDER II DACK I U AVUID PAIING FUK II (
KEEP SURR	RENDER	

<u>SECTION (8)</u> \bigstar ALL OTHER UNSECURED CREDITORS

IMPORTANT: **THE NEXT THREE PAGES ARE MOST CRUCIAL!!!!!!

THIS IS WHERE YOU PROVIDE THE INFORMATION ON ALL YOUR UNSECURED CREDITORS. IT IS ESSENTIAL THAT YOU BE THOROUGH HERE IN ORDER TO RECEIVED FULL BENEFIT OF YOUR DISCHARGE INCLUDING THE PROHIBITION AGAINST CONTACTING YOU ANY FURTHER OR ATTEMPTING TO FURTHER COLLECT FROM YOU. BUT YOU MUST NOTIFY THEM OF YOUR FILING TO REAP THAT BENEFIT. EVEN IF IT IS A DEBT YOU THINK YOU MAY HAVE PAID OFF, BUT AREN'T SURE, LIST THEM ANYWAY...NO HARM, NO FOUL! AND YOU MUST LIST ALL DEBTS. THE BANKRUPTCY CODE DOES NOT ALLOW YOU TO PICK AND CHOOSE WHAT UNSECURED DEBTS TO SCHEDULE.

YOU HAVE THREE OPTIONS WHEN IT COMES TO ENSURING WE HAVE ALL YOUR UNSECURED CREDITORS LISTED:

1. COMPLETE THE FOLLOWING SECTION FULLY; OR

2. YOU SUBMIT ALL INVOICES, BILLS, COLLECTIONS LETTERS ON ALL YOUR DEBTS TO OUR OFFICE; OR

3. You can pay us to pull a tri-merge credit report that will import into your petition; however, there is an additional fee for doing that (\$50/individual or \$100/couple). If you choose to go that route, we still ask you to at least go through the next three pages and list the name of the creditors that you can recall that way when we pull your credit report, we can add any creditors that didn't pull up...credit reports are not always inclusive of all your creditors as some creditors choose not to report to the bureaus.

****PLEASE DO NOT RE-LIST THE CREDITORS YOU HAVE ALSO PROVIDED IN PREVIOUS SECTIONS.**

THE FOLLOWING CREDITORS YOU LIST HERE SHOULD BE CREDIT CARDS, MEDICAL BILLS, COLLECTION ACCOUNTS, STUDENT LOANS, PAYDAY LOANS, ONLINE LOANS, BANK LOANS, BANK OVERDRAFTS, ETC.

THERE IS SPACE OVER THE NEXT PAGES FOR UP TO <u>22</u> CREDITORS. ONCE YOU ARE DONE WITH YOURS YOU MAY PROCEED TO SECTION 9. IF YOU HAVE MORE CREDITORS THAN THE SPACE PROVIDED HEREIN, PLEASE ATTACH OR EMAIL US THE INFORMATION ON THE ADDITIONAL CREDITORS.

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
Briefly describe the kind of debt this is (credit ca	ARD, LOAN, MEDICAL, PAYDAY OR STUDE	NT LOAN?
IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?		

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT THIS IS (CREDIT C	ARD, LOAN, MEDICAL, PAYDAY OR STUDE	NT LOAN?
IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?		

IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT TH	IIS IS (CREDIT CARD, LOAN, MEDICAL, PAYDAY	OR STUDENT LOAN?

IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	i
BRIEFLY DESCRIBE THE KIND OF DEBT THIS	IS (CREDIT CARD, LOAN, MEDICAL, PAYE	DAY OR STUDENT LOAN?

If this is a collection agency, who was the original creditor they are collecting for ?

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT TH	IS IS (CREDIT CARD, LOAN, MEDICAL, PAYD	AY OR STUDENT LOAN?
IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?		

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: $\$$	
BRIEFLY DESCRIBE THE KIND OF DEBT THIS IS (CREDIT	CARD, LOAN, MEDICAL, PAYDAY	Y OR STUDENT LOAN?
_		
IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIC	GINAL CREDITOR THEY ARE COLL	ECTING FOR?

IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?

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CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT TH	HIS IS (CREDIT CARD, LOAN, MEDICAL, PAYDA	AY OR STUDENT LOAN?

 CREDITOR NAME:

 ADDRESS:

 CITY:
 STATE:
 ZIP:

 Account Number:
 Amount you Owe: \$

 Briefly describe the kind of debt this is (credit card, loan, medical, payday or student loan?

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT THE	S IS (CREDIT CARD, LOAN, MEDICAL, PAYD	OAY OR STUDENT LOAN?
IF THIS IS A COLLECTION AGENCY, WHO W.	AS THE ORIGINAL CREDITOR THEY ARE CO	LLECTING FOR?

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT THIS IS (CREDIT CARD, LOAN, MEDICAL, PAYDA	Y OR STUDENT LOAN?
IF THIS IS A COLLECTION AGENCY, WHO WAS T	HE ORIGINAL CREDITOR THEY ARE COLL	ECTING FOR?

IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?

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CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT TH	HIS IS (CREDIT CARD, LOAN, MEDICAL, PAYDA	AY OR STUDENT LOAN?

 CREDITOR NAME:

 ADDRESS:

 CITY:
 STATE:
 ZIP:

 Account Number:
 Amount you Owe: \$

 Briefly describe the kind of debt this is (credit card, loan, medical, payday or student loan?

CREDITOR NAME:			
ADDRESS:			
CITY:	STATE:	ZIP:	
ACCOUNT NUMBER:	Amount you Owe: \$		
BRIEFLY DESCRIBE THE KIND OF DEBT TH	IS IS (CREDIT CARD, LOAN, MEDICAL, PAYD	AY OR STUDENT LOAN?	
IF THIS IS A COLLECTION AGENCY, WHO W	AS THE ORIGINAL CREDITOR THEY ARE CO	LLECTING FOR?	

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT THIS IS (CREDIT CARD, LOAN, MEDICAL, PAYDA	Y OR STUDENT LOAN?
IF THIS IS A COLLECTION AGENCY, WHO WAS T	HE ORIGINAL CREDITOR THEY ARE COLL	ECTING FOR?

IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT 1	THIS IS (CREDIT CARD, LOAN, MEDICAL, PAYDAY	OR STUDENT LOAN?

IF THIS IS A COLLECTION AGENCY, WHO WAS THE ORIGINAL CREDITOR THEY ARE COLLECTING FOR?

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT THIS IS	(CREDIT CARD, LOAN, MEDICAL, PAYE	DAY OR STUDENT LOAN?
IF THIS IS A COLLECTION AGENCY, WHO WAS	THE ORIGINAL CREDITOR THEY ARE CO	ELLECTING FOR?

CREDITOR NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
ACCOUNT NUMBER:	Amount you Owe: \$	
BRIEFLY DESCRIBE THE KIND OF DEBT TH	IS IS (CREDIT CARD, LOAN, MEDICAL, PAYD	AY OR STUDENT LOAN?
IF THIS IS A COLLECTION AGENCY, WHO V	AS THE ORIGINAL CREDITOR THEY ARE COI	LLECTING FOR?

TATE:	ZIP:
Amount you Owe: \$	
, LOAN, MEDICAL, PAYDAY OR STUDEN	IT LOAN?
CREDITOR THEY ARE COLLECTING FOR	?
	Amount you Owe: \$, loan, medical, payday or studen

SECTION 9. UNEXPIRED LEASES AND CONTRACTS

Are you currently in any leases or under any contracts, such as auto leases, commercial leases, apartment leases, phone contracts, directv, book clubs, etc? N_0 Yes

IF YES, PLEASE LIST EACH LEASE/CONTRACT AND STATE WHETHER YOU WOULD LIKE TO KEEP/RESUME IT OR WHETHER YOU WOULD LIKE TO REJECT/GET OUT OF THE CONTRACT OR LEASE.

SECTION 10. EMPLOYMENT & INCOME

DEBTOR/HUSBAND INCOME:

WHAT IS YOUR JOB TITLE/OCCUPATION:

WHAT IS THE NAME & ADDRESS OF YOUR EMPLOYER:

HOW LONG HAVE YOU BEEN EMPLOYED THERE:

I GET PAID WEEKLY EVERY TWO WEEKS TWICE A MONTH ONCE A MONTH OTHER What is the typical GROSS (before taxes and any deductions) amount of each check including overtime

you received that you can be sure to receive in the foreseeable future? \$

Do you have additional income sources? NO | YES

If so, please check all that apply and provide amount;

Social Security Retirement \$,
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SS Disability \$

Alimony/Child Support \$

Other \$ Describe:

SSI \$	
Private Disability	\$
Rental Income \$	

SPOUSE/WIFE INCOME:

WHAT IS YOUR JOB TITLE/OCCUPATION:

WHAT IS THE NAME & ADDRESS OF YOUR EMPLOYER:

HOW LONG HAVE YOU BEEN EMPLOYED THERE:

I GET PAID WEEKLY EVERY TWO WEEKS TWICE A MONTH ONCE A MONTH OTHER What is the typical GROSS (before taxes and any deductions) amount of each check including overtime you received that you can be sure to receive in the foreseeable future? \$

Do you have additional income sources? NO | YES

If so, please check all that apply and provide amount;

Social Security Retirement \$		
SS Disability \$		
Alimony/Child Support \$		
Other \$	Describe:	

SSI	\$
Private	e Disability \$
Rental	Income \$

If you or your spouse anticipate/expect an increase or decrease in income within the next year, please describe:______

SECTION 11. HOUSEHOLD EXPENSES

Monthly First Mortgage Payment or Rent Payment	\$
If NOT included above;	
Monthly Property Taxes	\$
Monthly Homeowners Insurance	\$
Renters Insurance	\$
Home Upkeep and maintenance	\$
HOA DUES	\$
Second Mortgage payment	\$
Utilities	
Electricity & Gas Bill	\$
Water & Sewer	\$
Phones/Cell/Cable & Internet	
Other:	\$
ould.	Ψ
Food for family	\$
Food for family	\$
Daycare/Aftercare and Monthly Tuition	\$
Clothing	\$
Medical/Dental	\$
(don't include what comes out of your paycheck for insurance,	
just out of pocket monthly expenses such as co-pays, prescriptions)	
Fuel for vehicles every month	\$
Charity (Donations and Tithing)	\$
Insurance Expenses;	
(do NOT list what comes out of your Paycheck, only additional	
out of pocket insurance payments)	
Life Insurance	\$
Health Insurance	\$
Vehicle Insurance	\$
Other:	\$ \$ \$
	Ŧ
Installment Payments;	
Car 1:	2
	\$
Car 2:	\$ \$ \$
Other:	\$
Other:	\$
Other:	\$
Alimony/Child Support Monthly Obligation	\$
Other Miscellaneous monthly obligations not listed abo	ve:

SECTION 12. MISCELLANEOUS

Other than in the ordinary course of a business, have you transferred or sold any assets within the last year? NO | Yes If yes, please describe what you sold/transferred, when and for what price?

Have you made any payments to family, friends or business partners in the last year? NO | Yes If yes, please to who, when and how much?

Are you currently or have you been involved in any lawsuits in the last year as either a defendant or a				
plaintiff ? NO Yes If yes, please describe each one and be sure that your bankruptcy attorney				
has paperwork for each suit (petition/judgment etc)				

List all property foreclo	osed or repossessed in the last year	r None
Creditor Name	Date of FC or Repo	Description and Value of Property

Have you suffered any losses in the last year by fire, theft or gambling?	NO	Yes	If yes, please
describe:			

Have you closed any financial accounts in the last year such checking/savings accounts, investment accounts? NO | Yes if yes please describe what kind of account, how much was in it when you closed/transferred it and why?

Do you own any safety deposit boxes? NO Yes Does anyone currently hold property for you that belongs to you?

NO	Yes	

For all business owned for last six years, please list the following for each;						
Name	<u>Taxpayer</u>	· ID/EIN	Address	Nature of Biz	Dates in Business	
Who does your	r books?	ME	Other;			

THE END!! Please don't forget to save to your files...then you may either print and bring to our office or you may scan/email/fax to us!!

> email to: bacchuslaw@gmail.com Page **18** of **18**